

<i>SERFF Tracking Number:</i>	<i>FNWW-127093975</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Farmers New World Life Insurance Company</i>	<i>State Tracking Number:</i>	<i>48392</i>
<i>Company Tracking Number:</i>	<i>FGDB WHOLE LIFE</i>		
<i>TOI:</i>	<i>L07I Individual Life - Whole</i>	<i>Sub-TOI:</i>	<i>L07I.211 Early Duration Reduced Benefit - Single Premium - Any Policy Design</i>
<i>Product Name:</i>	<i>Graded Death Benefit Whole Life</i>		
<i>Project Name/Number:</i>	<i>FGDB Whole Life/</i>		

Filing at a Glance

Company: Farmers New World Life Insurance Company

Product Name: Graded Death Benefit Whole Life SERFF Tr Num: FNWW-127093975 State: Arkansas

TOI: L07I Individual Life - Whole SERFF Status: Closed-Approved-Closed State Tr Num: 48392

Sub-TOI: L07I.211 Early Duration Reduced Benefit - Single Premium - Any Policy Design Co Tr Num: FGDB WHOLE LIFE State Status: Approved-Closed

Filing Type: Form Reviewer(s): Linda Bird
 Authors: Christine Andreason, Peter Lindstrom, Patrice Norgate, Lisa Trendler
 Date Submitted: 04/01/2011 Disposition Date: 05/31/2011

Implementation Date Requested: On Approval Disposition Status: Approved-Closed

State Filing Description: Implementation Date:

General Information

Project Name: FGDB Whole Life	Status of Filing in Domicile: Not Filed
Project Number:	Date Approved in Domicile:
Requested Filing Mode: Review & Approval	Domicile Status Comments:
Explanation for Combination/Other:	Market Type: Individual
Submission Type: New Submission	Individual Market Type:
Overall Rate Impact:	Filing Status Changed: 05/31/2011
	State Status Changed: 05/04/2011
Deemer Date:	Created By: Christine Andreason
Submitted By: Christine Andreason	Corresponding Filing Tracking Number: 2011-1123
Filing Description:	

<i>SERFF Tracking Number:</i>	<i>FNWW-127093975</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Farmers New World Life Insurance Company</i>	<i>State Tracking Number:</i>	<i>48392</i>
<i>Company Tracking Number:</i>	<i>FGDB WHOLE LIFE</i>		
<i>TOI:</i>	<i>L071 Individual Life - Whole</i>	<i>Sub-TOI:</i>	<i>L071.211 Early Duration Reduced Benefit - Single Premium - Any Policy Design</i>
<i>Product Name:</i>	<i>Graded Death Benefit Whole Life</i>		
<i>Project Name/Number:</i>	<i>FGDB Whole Life/</i>		

NAIC NO.: 0212-63177 State ID: FEIN: 91-0335750

Form Number Description

2011-123 Farmers Graded Death Benefit Whole Life

2011 FGDB APP Application for Graded Death Benefit Life Insurance
 2011 FGDB AMD Application Amendment – Graded Death Benefit Life Insurance
 2011 FGDB REINS Application for Reinstatement of Graded Death Benefit Life Insurance
 2011 RPU Reduced Paid-Up Endorsement
 FA Dec END Face Decrease Endorsement
 Overflow Addendum Overflow Addendum to Application

We are submitting the forms referenced above for your review and approval. The forms are new and do not replace any forms previously approved by state.

2011-123 is an individual, non-participating Graded Death Benefit Whole Life Insurance policy.

During the first two policy years, the death benefit is limited to premiums paid multiplied by 1.1 for death from natural causes (or excluded accidental cause), with the full death benefit payable for death from accidental cause. After the second policy year, the death benefit is the full death benefit, for death from any cause.

Level premiums are payable until age 100 and are guaranteed for the life of the contract. After age 100, premiums are no longer payable, but coverage continues until the policy matures at the policy anniversary following the insured's age 121st birthday. The plan is not offered with substandard premium ratings.

Policy fees for this product are:

Annual: \$140.00, Semi-Annual: \$75.00, Quarterly: \$40.00, Monthly: \$14.00, Monthly BCP (EFT): \$11.00.

At product implementation, we plan to offer all five billing options noted above. However, the company may only make EFT available to new issues and reinstatements.

The policy is sex-distinct.

Face Amount Limits: Minimum \$5,000 – Maximum \$20,000.

Issue Ages: 45-80

Face Amount Limits and Issue Ages may change in the future.

SERFF Tracking Number: FNWW-127093975 *State:* Arkansas
Filing Company: Farmers New World Life Insurance Company *State Tracking Number:* 48392
Company Tracking Number: FGDB WHOLE LIFE
TOI: L071 Individual Life - Whole *Sub-TOI:* L071.211 Early Duration Reduced Benefit -
Single Premium - Any Policy Design
Product Name: Graded Death Benefit Whole Life
Project Name/Number: FGDB Whole Life/

This product will be marketed by licensed representatives who are appointed with the company and will not be sold on an illustrated basis. In addition, it will be issued with no medical underwriting, based on the Proposed Insured's response to a few simplified application questions.

We are also submitting the following forms that will be used with this plan.

- 2011 RPU, an Endorsement. This endorsement will be used when the insured selects Reduced Paid Up insurance as a Nonforfeiture option.
- FA Dec END, an Endorsement. This endorsement will be used after issue, when the insured requests a decrease in face amount on a policy.
- 2011 FGDB APP Application for Graded Death Benefit Life Insurance

- FGDB REINS Application for Reinstatement of Graded Death Benefit Life Insurance
- FGDB AMD Application Amendment – Graded Death Benefit Life Insurance

Overflow Addendum Overflow Addendum which is used if additional information is needed on an application

Each application is used by our licensed representatives and agents who are appointed with the company. The questions asked are for qualifying purposes and no medical underwriting is done based on the answers to each question.

No part of this filing contains any unusual or possibly controversial items from normal company or industry standards. We plan to introduce these forms once approval has been received.

Farmers takes care to ensure that printer-based variations are minimized; however, should changes occur, such changes will not alter the content or meaning of any approved forms. Note the forms may be printed in other formats or via electronic media (e.g. CD-Rom, Internet, and Intranet). Distribution and access may also be via hard copy and electronic media. In all cases the forms will meet or exceed the minimum standards of the readability requirements.

If you have any questions or would like additional information, please contact me at (206) 275-8131 or by e-mail at peter.lindstrom@farmersinsurance.com.

Sincerely,
Pete Lindstrom
Product Management
Farmers New World Life

SERFF Tracking Number: FNWW-127093975 State: Arkansas

Filing Company: Farmers New World Life Insurance Company State Tracking Number: 48392

Company Tracking Number: FGDB WHOLE LIFE

TOI: L071 Individual Life - Whole Sub-TOI: L071.211 Early Duration Reduced Benefit - Single Premium - Any Policy Design

Product Name: Graded Death Benefit Whole Life

Project Name/Number: FGDB Whole Life/

Company and Contact

Filing Contact Information

Peter Lindstrom, Contract Specialist peter.lindstrom@farmersinsurance.com
 3003 77th Ave SE 206-275-8131 [Phone]
 Mercer Island, WA 98040 206-236-6526 [FAX]

Filing Company Information

Farmers New World Life Insurance Company CoCode: 63177 State of Domicile: Washington
 3003 77th Avenue S.E. Group Code: 212 Company Type: Life
 Mercer Island, WA 98040 Group Name: State ID Number:
 (206) 275-8131 ext. [Phone] FEIN Number: 91-0335750

Filing Fees

Fee Required? Yes
 Fee Amount: \$350.00
 Retaliatory? No
 Fee Explanation: Seven forms @\$50.00 each= \$350.00.
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Farmers New World Life Insurance Company	\$350.00	04/01/2011	46196926

<i>SERFF Tracking Number:</i>	<i>FNWW-127093975</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Farmers New World Life Insurance Company</i>	<i>State Tracking Number:</i>	<i>48392</i>
<i>Company Tracking Number:</i>	<i>FGDB WHOLE LIFE</i>		
<i>TOI:</i>	<i>L071 Individual Life - Whole</i>	<i>Sub-TOI:</i>	<i>L071.211 Early Duration Reduced Benefit - Single Premium - Any Policy Design</i>
<i>Product Name:</i>	<i>Graded Death Benefit Whole Life</i>		
<i>Project Name/Number:</i>	<i>FGDB Whole Life/</i>		

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Linda Bird	05/31/2011	05/31/2011
Approved-Closed	Linda Bird	05/04/2011	05/04/2011

Objection Letters and Response Letters

Objection Letters				Response Letters		
Status	Created By	Created On	Date Submitted	Responded By	Created On	Date Submitted
Pending Industry Response	Linda Bird	04/06/2011	04/06/2011	Peter Lindstrom	05/03/2011	05/03/2011

Amendments

Schedule	Schedule Item Name	Created By	Created On	Date Submitted
Form	Reduced Paid-Up Endorsement	Peter Lindstrom	05/27/2011	05/27/2011
Supporting Document	red-lined copy of RPU END due to corrections	Peter Lindstrom	05/27/2011	05/27/2011

Filing Notes

Subject	Note Type	Created By	Created On	Date Submitted
Re-open filing due to correction on form 2011 RPU END	Note To Filer	Linda Bird	05/27/2011	05/27/2011
re-open filing due to correction on form	Note To Reviewer	Peter Lindstrom	05/25/2011	05/25/2011

<i>SERFF Tracking Number:</i>	<i>FNWW-127093975</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Farmers New World Life Insurance Company</i>	<i>State Tracking Number:</i>	<i>48392</i>
<i>Company Tracking Number:</i>	<i>FGDB WHOLE LIFE</i>		
<i>TOI:</i>	<i>L071 Individual Life - Whole</i>	<i>Sub-TOI:</i>	<i>L071.211 Early Duration Reduced Benefit - Single Premium - Any Policy Design</i>
<i>Product Name:</i>	<i>Graded Death Benefit Whole Life</i>		
<i>Project Name/Number:</i>	<i>FGDB Whole Life/</i>		

2011 RPU END

<i>SERFF Tracking Number:</i>	<i>FNWW-127093975</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Farmers New World Life Insurance Company</i>	<i>State Tracking Number:</i>	<i>48392</i>
<i>Company Tracking Number:</i>	<i>FGDB WHOLE LIFE</i>		
<i>TOI:</i>	<i>L071 Individual Life - Whole</i>	<i>Sub-TOI:</i>	<i>L071.211 Early Duration Reduced Benefit - Single Premium - Any Policy Design</i>
<i>Product Name:</i>	<i>Graded Death Benefit Whole Life</i>		
<i>Project Name/Number:</i>	<i>FGDB Whole Life/</i>		

Disposition

Disposition Date: 05/31/2011

Implementation Date:

Status: Approved-Closed

Comment: Corrections made the Reduced Paid-Up Endorsement.

Rate data does NOT apply to filing.

SERFF Tracking Number: FNWW-127093975 State: Arkansas

Filing Company: Farmers New World Life Insurance Company State Tracking Number: 48392

Company Tracking Number: FGDB WHOLE LIFE

TOI: L071 Individual Life - Whole Sub-TOI: L071.211 Early Duration Reduced Benefit - Single Premium - Any Policy Design

Product Name: Graded Death Benefit Whole Life

Project Name/Number: FGDB Whole Life/

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		Yes
Supporting Document	Application		No
Supporting Document	Life & Annuity - Actuarial Memo		No
Supporting Document	Statement of variability		Yes
Supporting Document	Certification		Yes
Supporting Document	Policyholder Notice		Yes
Supporting Document	Certification Guaranty Assoc Notice		Yes
Supporting Document	red-lined copies of contract due to objections		Yes
Supporting Document	red-lined copy of RPU END due to corrections		Yes
Form (revised)	Farmers Graded Death Benefit Whole Life		Yes
Form	Farmers Graded Death Benefit Whole Life	Replaced	Yes
Form	Application for Graded Benefit Life Insurance		Yes
Form	Application Amendment-Graded Death Benefit for Life Insurance		Yes
Form	Application for Reinstatement of Graded Death Benefit Life Insurance		Yes
Form (revised)	Reduced Paid-Up Endorsement		Yes
Form	Reduced Paid-Up Endorsement	Replaced	Yes
Form	Face Decrease Endorsement		Yes
Form	Overflow Addendum		Yes

<i>SERFF Tracking Number:</i>	<i>FNWW-127093975</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Farmers New World Life Insurance Company</i>	<i>State Tracking Number:</i>	<i>48392</i>
<i>Company Tracking Number:</i>	<i>FGDB WHOLE LIFE</i>		
<i>TOI:</i>	<i>L071 Individual Life - Whole</i>	<i>Sub-TOI:</i>	<i>L071.211 Early Duration Reduced Benefit - Single Premium - Any Policy Design</i>
<i>Product Name:</i>	<i>Graded Death Benefit Whole Life</i>		
<i>Project Name/Number:</i>	<i>FGDB Whole Life/</i>		

Disposition

Disposition Date: 05/04/2011

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: FNWW-127093975 State: Arkansas

Filing Company: Farmers New World Life Insurance Company State Tracking Number: 48392

Company Tracking Number: FGDB WHOLE LIFE

TOI: L071 Individual Life - Whole Sub-TOI: L071.211 Early Duration Reduced Benefit - Single Premium - Any Policy Design

Product Name: Graded Death Benefit Whole Life

Project Name/Number: FGDB Whole Life/

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		Yes
Supporting Document	Application		No
Supporting Document	Life & Annuity - Actuarial Memo		No
Supporting Document	Statement of variability		Yes
Supporting Document	Certification		Yes
Supporting Document	Policyholder Notice		Yes
Supporting Document	Certification Guaranty Assoc Notice		Yes
Supporting Document	red-lined copies of contract due to objections		Yes
Supporting Document	red-lined copy of RPU END due to corrections		Yes
Form (revised)	Farmers Graded Death Benefit Whole Life		Yes
Form	Farmers Graded Death Benefit Whole Life	Replaced	Yes
Form	Application for Graded Benefit Life Insurance		Yes
Form	Application Amendment-Graded Death Benefit for Life Insurance		Yes
Form	Application for Reinstatement of Graded Death Benefit Life Insurance		Yes
Form (revised)	Reduced Paid-Up Endorsement		Yes
Form	Reduced Paid-Up Endorsement	Replaced	Yes
Form	Face Decrease Endorsement		Yes
Form	Overflow Addendum		Yes

SERFF Tracking Number: FNWW-127093975 *State:* Arkansas
Filing Company: Farmers New World Life Insurance Company *State Tracking Number:* 48392
Company Tracking Number: FGDB WHOLE LIFE
TOI: L071 Individual Life - Whole *Sub-TOI:* L071.211 Early Duration Reduced Benefit -
Single Premium - Any Policy Design
Product Name: Graded Death Benefit Whole Life
Project Name/Number: FGDB Whole Life/

Objection Letter

Objection Letter Status Pending Industry Response
Objection Letter Date 04/06/2011
Submitted Date 04/06/2011
Respond By Date 05/06/2011

Dear Peter Lindstrom,

This will acknowledge receipt of the captioned filing.

Objection 1

Comment: Ark. Code Ann. 23-79-138 requires that certain information accompany every policy. Bulletin 15-2009 further address this issue. Please review your issue procedures and assure us that you are in compliance.

Regulation 49 requires that a Life and Health guaranty notice be given to each policy owner. Please review your issue procedures and assure us that you are in compliance with Regulation 49.

Regulation 19s10B requires that all new or revised filings submitted must contain a certification that the submission meets the provisions of this rule as well as all applicable requirements of this Department.

Life policies with reduced death benefits in early policy years are subject to Bulletin 8-85. The contract is in violation of both Guideline One and Two of this bulletin.

Please feel free to contact me if you have questions.

Sincerely,

Linda Bird

SERFF Tracking Number: FNWW-127093975 State: Arkansas
Filing Company: Farmers New World Life Insurance Company State Tracking Number: 48392
Company Tracking Number: FGDB WHOLE LIFE
TOI: L071 Individual Life - Whole Sub-TOI: L071.211 Early Duration Reduced Benefit -
Single Premium - Any Policy Design
Product Name: Graded Death Benefit Whole Life
Project Name/Number: FGDB Whole Life/

Response Letter

Response Letter Status Submitted to State
Response Letter Date 05/03/2011
Submitted Date 05/03/2011

Dear Linda Bird,

Comments:

Response 1

Comments: Dear Linda Bird,

I am responding to your objections dated 4/6/2011. We have provided red-lined copies of our changes along with a final version of the 2011-123 contract. I have provided responses to your objections and requests below for your information.

Objection 1

Comments:

Ark. Code Ann. 23-79-138 requires that certain information accompany every policy. Bulletin 15-2009 further address this issue. Please review your issue procedures and assure us that you are in compliance.

Response: We have provided a copy of our Policyholder Notice that is attached with each policy and provided to the customer. A certification is also provided.

Regulation 49 requires that a Life and Health guaranty notice be given to each policy owner. Please review your issue procedures and assure us that you are in compliance with Regulation 49.

Response: We are in compliance with this regulation and have attached a certification to that fact. The Life and health Guaranty Notice is attached to all Life contracts.

Regulation 19s10B requires that all new or revised filings submitted must contain a certification that the submission meets the provisions of this rule as well as all applicable requirements of this Department.

Response: We have attached a certification as required.

Life policies with reduced death benefits in early policy years are subject to Bulletin 8-85. The contract is in violation of both Guideline One and Two of this bulletin.

SERFF Tracking Number: FNWW-127093975 State: Arkansas

Filing Company: Farmers New World Life Insurance Company State Tracking Number: 48392

Company Tracking Number: FGDB WHOLE LIFE

TOI: L071 Individual Life - Whole Sub-TOI: L071.211 Early Duration Reduced Benefit - Single Premium - Any Policy Design

Product Name: Graded Death Benefit Whole Life

Project Name/Number: FGDB Whole Life/

Response: We have made changes to our contract to be in compliance with this bulletin. Red-lined copies of the changes made are attached and no other changes have been made to our original filing of that form.

We hope these responses will satisfy your objections.

Thank you,

Pete Lindstrom

Related Objection 1

Comment:

Ark. Code Ann. 23-79-138 requires that certain information accompany every policy. Bulletin 15-2009 further address this issue. Please review your issue procedures and assure us that you are in compliance.

Regulation 49 requires that a Life and Health guaranty notice be given to each policy owner. Please review your issue procedures and assure us that you are in compliance with Regulation 49.

Regulation 19s10B requires that all new or revised filings submitted must contain a certification that the submission meets the provisions of this rule as well as all applicable requirements of this Department.

Life policies with reduced death benefits in early policy years are subject to Bulletin 8-85. The contract is in violation of both Guideline One and Two of this bulletin.

Changed Items:

Supporting Document Schedule Item Changes

Satisfied -Name: Certification

Comment:

Satisfied -Name: Policyholder Notice

Comment:

Satisfied -Name: Certification Guaranty Assoc Notice

Comment:

Satisfied -Name: red-lined copies of contract due to objections

Comment: Attached are the red-lined copies of chnages made to the contract due to your objections. No other changes have been made.

Form Schedule Item Changes

Form Name	Form Number	Edition Date	Form Type	Action	Action Specific	Readability Score	Attach Document
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<i>SERFF Tracking Number:</i>	<i>FNWW-127093975</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Farmers New World Life Insurance Company</i>	<i>State Tracking Number:</i>	<i>48392</i>
<i>Company Tracking Number:</i>	<i>FGDB WHOLE LIFE</i>		
<i>TOI:</i>	<i>L071 Individual Life - Whole</i>	<i>Sub-TOI:</i>	<i>L071.211 Early Duration Reduced Benefit - Single Premium - Any Policy Design</i>
<i>Product Name:</i>	<i>Graded Death Benefit Whole Life</i>		
<i>Project Name/Number:</i>	<i>FGDB Whole Life/</i>		

			Data	
Farmers Graded Death 2011-123	Policy/Contract/Fraternal Initial	68.980	2011-123	
Benefit Whole Life	Certificate: Amendment, Insert Page, Endorsement or Rider		- FGDB AR - Master rev 5-3-11.pdf	

Previous Version

<i>Farmers Graded Death 2011-123</i>	<i>Policy/Contract/Fraternal Initial</i>	<i>68.980</i>	<i>2011-</i>
<i>Benefit Whole Life</i>	<i>Certificate: Amendment, Insert Page, Endorsement or Rider</i>		<i>123.pdf</i>

No Rate/Rule Schedule items changed.

Sincerely,
Christine Andreason, Lisa Trendler, Patrice Norgate, Peter Lindstrom

SERFF Tracking Number: FNWW-127093975 State: Arkansas
 Filing Company: Farmers New World Life Insurance Company State Tracking Number: 48392
 Company Tracking Number: FGDB WHOLE LIFE
 TOI: L071 Individual Life - Whole Sub-TOI: L071.211 Early Duration Reduced Benefit - Single Premium - Any Policy Design
 Product Name: Graded Death Benefit Whole Life
 Project Name/Number: FGDB Whole Life/

Amendment Letter

Submitted Date: 05/27/2011

Comments:

We discovered that the amounts from our spreadsheet were incorrectly shown on the columns of Form 2011 RPU END. We have replaced our incorrect form and also provided a red-lined version showing the only changes to the previously approved form.

Thank you for re-opening this filing.

Pete Lindstrom

Changed Items:

Form Schedule Item Changes:

Form Schedule Item Changes:

Form Number	Form Type	Form Name	Action	Form Action Other	Previous Filing #	Replaced Form #	Readability Score	Attachments
2011 RPU END	Policy/Contract/Fraternal Paid-Up Certificate: Amendment, t Insert Page, Endorsement or Rider	Reduced	Initial				61.340	2011 RPU END - FGDBWL Filing Master MIM 6648 rev 5-23-11.pdf

Supporting Document Schedule Item Changes:

User Added -Name: red-lined copy of RPU END due to corrections

Comment:

2011 RPU END - FGDBWL MIM 6648 Redlined rev 5-23-11.pdf

SERFF Tracking Number: *FNWW-127093975* *State:* *Arkansas*
Filing Company: *Farmers New World Life Insurance Company* *State Tracking Number:* *48392*
Company Tracking Number: *FGDB WHOLE LIFE*
TOI: *L071 Individual Life - Whole* *Sub-TOI:* *L071.211 Early Duration Reduced Benefit -
Single Premium - Any Policy Design*
Product Name: *Graded Death Benefit Whole Life*
Project Name/Number: *FGDB Whole Life/*

Note To Filer

Created By:

Linda Bird on 05/27/2011 10:16 AM

Last Edited By:

Linda Bird

Submitted On:

05/27/2011 10:16 AM

Subject:

Re-open filing due to correction on form 2011 RPU END

Comments:

Filing will be re-opened in order for correction to be made. The Department will require a \$50.00 fee in order to re-open the filing.

SERFF Tracking Number: FNWW-127093975 *State:* Arkansas
Filing Company: Farmers New World Life Insurance Company *State Tracking Number:* 48392
Company Tracking Number: FGDB WHOLE LIFE
TOI: L071 Individual Life - Whole *Sub-TOI:* L071.211 Early Duration Reduced Benefit -
Single Premium - Any Policy Design
Product Name: Graded Death Benefit Whole Life
Project Name/Number: FGDB Whole Life/

Note To Reviewer

Created By:

Peter Lindstrom on 05/25/2011 03:59 PM

Last Edited By:

Peter Lindstrom

Submitted On:

05/25/2011 03:59 PM

Subject:

re-open filing due to correction on form 2011 RPU END

Comments:

Please re-open this filing since we found an error in the amounts that were transferred from our spreadsheet to the table of form 2011 RPU END. No other changes were made to the original approved forms. The amounts adjusted 1 line. We will provide a corrected form and red-lines of the only changes.

SERFF Tracking Number: FNWW-127093975 State: Arkansas

Filing Company: Farmers New World Life Insurance Company State Tracking Number: 48392

Company Tracking Number: FGDB WHOLE LIFE

TOI: L071 Individual Life - Whole Sub-TOI: L071.211 Early Duration Reduced Benefit - Single Premium - Any Policy Design

Product Name: Graded Death Benefit Whole Life

Project Name/Number: FGDB Whole Life/

Form Schedule

Lead Form Number: 2011-123

Schedule Item Status	Form Number	Form Type Form Name	Action	Action Specific Data	Readability	Attachment
	2011-123	Policy/Cont Farmers Graded ract/Fratern Death Benefit Whole al Life Certificate: Amendmen t, Insert Page, Endorseme nt or Rider	Initial		68.980	2011-123 - FGDB AR - Master rev 5- 3-11.pdf
	2011 FGDB APP	Application/ Enrollment Graded Benefit Life Form Insurance	Initial		61.030	2011 FGDB APP AR.pdf
	2011 FGDB AMD	Application/ Enrollment Amendment-Graded Form Death Benefit for Life Insurance	Initial		69.250	2011 FGDB AMD AR.pdf
	2011 FGDB REINS	Application/ Enrollment Reinstatement of Form Graded Death Benefit Life Insurance	Initial		67.040	2011 FGDB REINS AR.pdf
	2011 RPU END	Policy/Cont Reduced Paid-Up ract/Fratern Endorsement al Certificate: Amendmen t, Insert Page, Endorseme nt or Rider	Initial		61.340	2011 RPU END - FGDBWL Filing Master MIM 6648 rev 5-23-11.pdf

<i>SERFF Tracking Number:</i>	<i>FNWW-127093975</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Farmers New World Life Insurance Company</i>	<i>State Tracking Number:</i>	<i>48392</i>
<i>Company Tracking Number:</i>	<i>FGDB WHOLE LIFE</i>		
<i>TOI:</i>	<i>L071 Individual Life - Whole</i>	<i>Sub-TOI:</i>	<i>L071.211 Early Duration Reduced Benefit - Single Premium - Any Policy Design</i>
<i>Product Name:</i>	<i>Graded Death Benefit Whole Life</i>		
<i>Project Name/Number:</i>	<i>FGDB Whole Life/</i>		

FA Dec	Policy/Cont Face Decrease	Initial	74.290	FA Dec
END	ract/Fratern Endorsement			END.pdf
	al			
	Certificate:			
	Amendmen			
	t, Insert			
	Page,			
	Endorseme			
	nt or Rider			
Overflow	Application/ Overflow Addendum	Initial	63.830	Overflow
Addendum	Enrollment			Addendum.pd
	Form			f



FARMERS
LIFE INSURANCE

Farmers New World Life Insurance Company

[Home Office: 3003 77th Ave. S.E., Mercer Island, Washington 98040 / (206)232-8400
Columbus Life Office: 2500 Farmers Drive, Columbus, Ohio 43235 / (614) 764-9975]

A STOCK COMPANY

Insured [JOHN DOE]

[007002209] Policy Number

In the Entire Policy Contract, references to the Policy Owner will be stated as "You" and "Your" and references to Farmers New World Life Insurance Company will be stated as "Us," "We," and "Our."

In consideration of the application and payment of premiums, We insure the person named above as the Insured in accordance with the provisions of this policy and We will pay the Proceeds Payable in the manner provided in the section titled Payment of Proceeds.



This policy's Face Amount, the amount and frequency of the Premium Payment, and other policy data are shown on the Policy Specifications page.

THIS POLICY HAS A LIMITED GRADED DEATH BENEFIT – PLEASE READ YOUR CONTRACT CAREFULLY.

This policy contains a Graded Death Benefit clause which means in order to receive the full benefits that this policy offers You must live two Policy Years beyond the Issue Date of this policy.

NOTICE OF YOUR RIGHT TO RETURN THIS POLICY

RIGHT TO EXAMINE PERIOD: This policy may, at any time within [30] days after its receipt by You, be returned for cancellation by delivering it or mailing it along with a signed request for cancellation to an agent of the company, to Our branch office, or to Our Home Office at the address listed above. Such delivery or mailing of this policy and signed request for cancellation shall void this policy from the beginning and the parties shall be in the same position as if no policy had been issued. We will refund all premiums paid, including any fees or charges.


Thomas J. White
President

Brian Kreger
Secretary

Farmers New World Life Insurance Company

2011-123 NONPARTICIPATING GRADED DEATH BENEFIT WHOLE LIFE INSURANCE. LIMITED DEATH BENEFIT DURING THE FIRST TWO POLICY YEARS. LEVEL DEATH BENEFIT THEREAFTER. PREMIUMS PAYABLE TO ATTAINED AGE 100.

04472 AR

**THIS POLICY IS A LEGAL CONTRACT BETWEEN YOU AND US.
READ YOUR POLICY CAREFULLY.**

ALPHABETIC GUIDE TO YOUR POLICY

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DEFINITIONS

This section provides definitions for capitalized terms not defined or explained elsewhere in the Entire Policy Contract.

Assignment	An agreement under which You transfer some or all of Your ownership rights to another party, who is called the Assignee.
Attained Age	The sum of the Issue Age plus the number of Policy Years completed since the Issue Date.
Evidence of Insurability	Information concerning any person to be Insured under this policy, which We deem sufficient to approve an application for this policy or changes to this policy or a Reinstatement of this policy.
Face Amount	An amount chosen by You that is used to calculate premiums and determine the Proceeds Payable. The actual Proceeds Payable paid upon death may be more or less than the Face Amount.
In Force	In effect. An insurance policy that is In Force will provide all rights and benefits available thereunder. If this policy is not In Force there will be no rights or benefits.
Insured	The natural person whose life is covered under this policy.
Issue Age	The Insured's age as of his/her last birthday on this policy's Issue Date.
Issue Date	The effective date for the insurance coverage under this policy, provided the first Premium Payment has been made and all policy issue requirements have been received by Us. Policy Months, Years, and Anniversaries are measured from the Issue Date, which is shown on the Policy Specifications page.
Lapse	The termination of this policy due to nonpayment of sufficient Premium Payments or loan repayments. A policy that has Lapsed provides no further benefit.
Maturity Date	The Maturity Date of this policy is the Policy Anniversary when the Insured's Attained Age is 121.
Monthly Policy Date	The same day each month as the Issue Date for each succeeding month.
Policy Anniversary	The same day and month as the Issue Date for each succeeding year this policy remains In Force.
Policy Month	The period from one Monthly Policy Date (or from the Issue Date) to the next Monthly Policy Date.
Policy Year	The period from one Policy Anniversary (or from the Issue Date) to the next Policy Anniversary.
Premium Due Date	The day of each month on which Your Premium Payment becomes due. The Premium Due Date is the same day of the month as the Issue Date.

GENERAL PROVISIONS

Entire Policy Contract	<p>The Entire Policy Contract is:</p> <ol style="list-style-type: none">1. this policy;2. any attached applications;3. any attached amendments and supplements to the applications;4. any attached endorsements;5. any attached Reinstatement applications;6. any attached application for changes;7. any revised Policy Specifications page issued by Us; and8. any document We send You with instructions to attach it to Your policy.
Change of Contract	<p>Any change in the terms of the Entire Policy Contract must be in writing and signed by one of Our officers. A change can be in the form of an endorsement, or an amendment or supplement to an application. A copy of the change will be attached to this policy or will be sent to You to attach to Your policy. No insurance producer has the authority to change any terms or conditions of the Entire Policy Contract.</p>
Incontestability	<p>We rely on the statements made in any applications for this policy. We also rely on statements made in any amendments and supplements to applications. In the absence of fraud, statements made in any applications or in any amendments or supplements to applications are deemed representations and not warranties.</p> <p>In addition to any other reasons permitted by law, We can contest the validity of this policy, or any Reinstatement of this policy, if:</p> <ol style="list-style-type: none">1. any material misrepresentation of fact is made in any applications or any amendments or supplements to applications; and2. a copy of the applications or amendments or supplements to applications is attached to this policy when issued or later made a part of this policy after the Issue Date. <p>Except for Reinstatements, We will not contest this policy after it has been In Force during the lifetime of the Insured for two years after the Issue Date. If this policy is Reinstated, We will not contest this policy based upon any statements on the Reinstatement application after it has been In Force during the lifetime of the Insured for two years after the effective date of Reinstatement.</p>
Suicide	<p>If, within two years after the Issue Date, the Insured dies by suicide, while sane or insane, We will limit the Proceeds Payable to the Premium Payments made minus any Policy Loans taken.</p>
Misstatement of Age or Gender	<p>If the Insured's age or gender was misstated, We will adjust the Proceeds Payable. The adjusted Proceeds Payable will be that which the most recent Premium Payments made would have purchased at the correct age or gender.</p> <p>Proof of age or gender may be filed with Us at any time. Once the Insured's age or gender is established to Our satisfaction, We will use this age or gender in any settlement.</p>
Internal Revenue Code	<p>This policy is intended to qualify as life insurance under the Internal Revenue Code. Accordingly, the provisions of this policy are to be interpreted and will be administered by Us to ensure such tax qualification.</p>
Conformity to State Laws	<p>This policy is subject to the laws of the state in which it is issued. Any terms which are in conflict with these laws are amended to conform.</p>
Nonparticipating Claims of Creditors	<p>This policy is Nonparticipating. It does not share in Our surplus earnings.</p> <p>To the extent allowed by law, no benefits of this policy will be subject to any claim of legal process by any creditor.</p>

OWNERSHIP

Policy Owner	The Policy Owner of this policy is the Insured unless: <ol style="list-style-type: none">1. another natural person or entity has been named as Policy Owner in the application; or2. a new Policy Owner is named in accordance with the Change of Policy Owner section.
Rights of Policy Owner	During the lifetime of the Insured, the Policy Owner may exercise all rights and privileges provided in this policy.
Policy Co-Owner	More than one natural person or entity may be named as the Policy Owner in accordance with the Change of Policy Owner section. Such natural persons or entities shall serve as Policy Co-Owners and shall act jointly to exercise all the rights of the Policy Owner. If a Policy Co-Owner dies during the Insured's lifetime and no Successor Owner for the deceased Policy Co-Owner has been named, the remaining Policy Co-Owner(s) shall become the Policy Owner(s).
Successor Owner	During the Insured's lifetime, the Policy Owner may name a Successor Owner to become the Policy Owner upon the Policy Owner's death. If no Successor Owner is named or the Successor Owner and Policy Owner both die before the Insured and no other Change of Policy Owner has been made, then the Insured will become the Policy Owner, unless the Insured has not reached the age of majority as established by the laws in the state in which the Insured resides, in which case the Beneficiary, in order from primary to contingent, if any is living, will become the Policy Owner(s).
Change of Policy Owner	The Policy Owner may name a new Policy Owner, add a Policy Owner to establish Policy Co-Owners, or name a Successor Owner by notifying Us in writing while the Insured is alive, subject to any existing Assignment. When We receive acceptable signed notice, the change will take effect on the date the notice was signed. The change is subject to any action We may have taken before receiving the notice.
Assignment	The Policy Owner may assign this policy. We are not bound by an Assignment unless the Assignment forms executed by the Policy Owner are recorded by Us. The Assignment shall take effect on the date the notice of Assignment is signed by the Policy Owner, subject to any payments made, or actions taken by the company prior to receipt of the notice. We are not responsible for the validity of an Assignment.

BENEFICIARY

Beneficiary Designation	The Beneficiary is the natural person(s) or the entity(ies) named to receive the Proceeds Payable at the Insured's death. The Beneficiary is as named in the application or as changed by Your signed request while the Insured is living.
Change of Beneficiary	You may change the Beneficiary at any time before the Insured dies, subject to the rights of any Assignee or Irrevocable Beneficiary. You must sign any change request and it must be recorded by Us to be effective. The change request must be signed before the Insured's death but may be recorded by Us after the Insured's death. The change will take effect on the date it was signed, subject to any payment We make or any action taken by Us before We receive the request.
Delay Clause	This is an optional clause. If requested, this clause provides that, if the Beneficiary dies within a specified number of days following the Insured's death (not including the date of death), the Proceeds Payable will be paid as if the Beneficiary died before the Insured. The specified number of days cannot exceed 180. You may request a Delay Clause in the application or in any acceptable signed request recorded by Us while the Insured is living. If a Delay Clause is requested and a number of days is not specified, the default is 15 days.

DEATH BENEFIT

Death Benefit	The Death Benefit payable depends on the Policy Year in which the Insured dies.
Graded Death Benefit	A Death Benefit that is 5% of the Face Amount of the Policy when the Insured dies in Policy Year 1, or 10% of the Face Amount of the Policy when the Insured dies in Policy Year 2.
Ultimate Face Amount	The Face Amount of the Policy.
Policy Years 1 & 2	If the Insured dies in the first or second Policy Year, the Death Benefit is the Graded Death Benefit.
Policy Year 3 or Later	In the third Policy Year or later, the Death Benefit is the Ultimate Face Amount.

PAYMENT OF PROCEEDS

Proceeds	<p>If the Insured dies while this policy is In Force, We will pay the Proceeds Payable within 30 days after Our receipt of satisfactory proof of death, to the Beneficiary as described below, subject to Our rights to investigate any claim under this policy, and subject to the Incontestability provision or any Assignment of this policy:</p> <ol style="list-style-type: none">1. to any primary Beneficiary;2. if no primary Beneficiary survives the Insured, We will pay the Proceeds Payable to any contingent Beneficiary who survives the Insured. Unless otherwise specified, the interest of any Beneficiary who dies before the Insured will pass to any Beneficiary in the same class (that is primary or contingent) who survives the Insured; and3. if no Beneficiary survives the Insured, We will pay the Proceeds Payable to the Policy Owner or the Policy Owner's estate. <p>Payment will be made as a lump sum deposit to a draft account unless otherwise requested in writing signed by the Beneficiary.</p>
Proceeds Payable	<p>The Proceeds Payable are:</p> <ol style="list-style-type: none">1. the Death Benefit; plus2. any part of Premium Payments made beyond the Policy Month of the Insured's death; less3. any Policy Loans and accrued loan interest; less4. any Premium Payments due and unpaid at the date of death; less5. any Surrender proceeds previously paid.
Interest on the Proceeds Payable	<p>We shall pay interest on the Proceeds Payable from the date of death to the date of payment. The interest shall be the current rate of interest on proceeds left on deposit, plus additional interest at a rate of 10% annually, until the date the claim is paid, beginning 30 calendar days from the latest of:</p> <ol style="list-style-type: none">1. the date We receive satisfactory proof of death;2. the date We receive sufficient information to determine our liability, the extent of the liability, and the appropriate payee legally entitled to the Proceeds Payable; and3. the date that legal impediments to payment of proceeds that depend on the action of parties other than Us are resolved and sufficient evidence of the same is provided to Us. Legal impediments to payment include, but are not limited to:<ol style="list-style-type: none">a) the establishment of guardianships and conservatorship;b) the appointment and qualification of trustees, executors and administrators; andc) the submission of information required to satisfy state and federal reporting requirements.
Duty to Cooperate	<p>You and any Beneficiary or other claimant shall at all times fully cooperate with Us in Our review and investigation of any claim for benefits under this policy, and You and any Beneficiary or claimant shall provide Us with any information and assistance We may reasonably request to enable Us to pay any Proceeds Payable in a timely manner.</p> <p>We reserve the right, at Our expense, to require an autopsy unless prohibited by law.</p>

PREMIUMS AND REINSTATEMENTS

Premium Payments

The first Premium Payment is due on the Policy Issue Date and must be paid before coverage begins. Subsequent premiums are payable in advance of the period they are to cover to Us at Our Home Office or to one of Our authorized agents. Premium Payments are not required or allowed at or beyond the Insured's Attained Age 100. Your premiums are payable in U.S. currency. We will provide a receipt upon request.

Other than the first initial premium payment, all subsequent premiums will be payable by Monthly Electronic Funds Transfer.

Grace Period

We allow a grace period of 31 days following the Premium Due Date of each Premium Payment. This policy will remain In Force during the Grace Period. If the Premium Payment due is not paid by the end of the 31-day Grace Period, this Entire Policy Contract will Lapse except as provided in the Nonforfeiture Option Section.

If the Insured dies during the Grace Period, the Proceeds Payable will reflect any overdue Premium Payments.

Reinstatement

This policy may be Reinstated within three years of entering a Grace Period that ends with a subsequent Lapse in coverage or within three years of exercising the Reduced Paid-Up Life Insurance Nonforfeiture Option. Reinstatement is not allowed if this policy has been Surrendered.

We will Reinstatement any Policy Loan Balance outstanding on the date of Lapse or on the date the Reduced Paid-Up Life Insurance Nonforfeiture Option was exercised.

To Reinstatement this policy, You must:

1. provide Evidence of Insurability sufficient to demonstrate that there has been no material change in the health of the Insured covered under this policy since the Issue Date;
2. pay past due Premium Payments plus interest at a rate specified by us, not to exceed 6% per year compounded annually;
3. pay accrued loan interest from the date of Lapse or the date the Reduced Paid-Up Life Insurance Nonforfeiture Option was exercised to the next Policy Anniversary; and
4. complete the appropriate company authorization to pay all future premiums by Monthly Electronic Funds Transfer.

The effective date of the Reinstatement will be the date the Reinstatement application is approved by Us, provided that all above requirements have been satisfied and provided the Insured is living on that date. The Incontestability provision of this contract is effective for two years from the effective date of Reinstatement.

Automatic Reinstatement

We will automatically Reinstatement this policy within 20 days after the end of the Grace Period if We receive all past due Premium Payments while the Insured is living.

CASH VALUE AND CASH SURRENDER VALUE

Cash Value

If You have not exercised the Nonforfeiture Option, the Cash Value of this policy is the Cash Value shown in the Table of Guaranteed Values, adjusted to reflect premiums due and paid since the most recent Policy Anniversary.

Cash Surrender Value

The Cash Surrender Value is:

1. the Cash Value; less
2. any outstanding Policy Loans and accrued loan interest; plus
3. any Premium Payments we have received that have not become due.

Cash Surrender

On any date that this policy has a Cash Surrender Value, as defined in the Cash Surrender Value section, You may Surrender this policy for the Cash Surrender Value after We receive Your signed request together with this policy. If this policy is surrendered within 30 days following a Policy Anniversary the value available shall not be less than the anniversary value. We have the right to defer payment for up to six months or the period allowed by law, if less. If You Surrender this policy prior to the Insured's Attained Age 100 and this policy is not within a Grace Period, this policy will terminate the first Monthly Policy Date on or after the Surrender. If You Surrender this policy during a Grace Period or at the Insured's Attained Ages 100 through 120, this policy will terminate on the date of the Surrender.

Maturity

If this policy is In Force on the Maturity Date, the Cash Surrender Value will be sent to the Policy Owner, this policy will terminate, and all coverage under the Entire Policy Contract will end.

NONFORFEITURE OPTION

If You stop making Premium Payments after Your policy has a Cash Value, You may exercise the Nonforfeiture Option subject to the terms below.

Reduced Paid-Up Life Insurance

This policy may continue as Paid-Up Life Insurance for a reduced Face Amount. On the date this option is exercised, the Cash Surrender Value will be used as a net single premium at the Insured's Attained Age to determine the Face Amount of the Reduced Paid-Up Life Insurance. Since any Policy Loan outstanding on the date this option is exercised, together with accrued interest, will be deducted in calculating the Reduced Paid-Up Life Insurance, the Policy Loan outstanding on the option exercise date will be considered as fully repaid and will not be deducted again from any Proceeds Payable. New Policy Loans taken after the option is exercised will be deducted from any Proceeds Payable.

Reduced Paid-Up Life Insurance will have its own Cash Surrender and Policy Loan privileges. If the Reduced Paid Up Life Insurance is Surrendered, this policy will terminate on the date of the Surrender.

Activation of Option

You may exercise the Nonforfeiture Option no later than 60 days after the premium due date, by sending Us a signed request. However, the Reduced Paid-Up Life Insurance Nonforfeiture Option can only be exercised before the Insured reaches Attained Age 100. At the end of a Grace Period, if Your policy has a Cash Surrender Value and the Automatic Premium Loan provision is not in effect, We will automatically exercise the Nonforfeiture Option.

GUARANTEED VALUES

The Guaranteed Values for this policy are determined by the Issue Age and gender of the Insured, and by the number of Policy Years that Premium Payments have been made. These values assume Premium Payments are made to the end of the Policy Year and that no Policy Loan exists on this policy. The Cash Values and amounts of Reduced Paid-Up Life Insurance are for each \$1,000 of Face Amount.

TABLE OF GUARANTEED VALUES

Issue Age 45		Issue Age 46		Issue Age 47		End of Year	Issue Age 48		Issue Age 49		Issue Age 50	
Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up		Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up
0.00	0	0.00	0	0.00	0	1	0.00	0	0.00	0	0.00	0
5.77	20	6.47	22	7.23	23	2	8.03	25	8.88	27	9.79	28
20.41	67	21.83	69	23.32	71	3	24.87	74	26.46	75	28.07	78
35.56	112	37.69	115	39.90	118	4	42.16	120	44.43	123	46.73	125
51.19	156	54.03	159	56.92	162	5	59.84	165	62.78	167	65.70	170
67.30	198	70.80	202	74.33	205	6	77.89	208	81.43	210	84.96	212
83.84	239	87.95	242	92.10	245	7	96.24	248	100.36	251	104.50	253
100.75	277	105.46	281	110.17	284	8	114.87	287	119.58	289	124.42	292
118.01	314	123.27	318	128.52	321	9	133.78	324	139.16	326	144.76	329
135.57	349	141.34	353	147.13	356	10	153.04	359	159.15	362	165.48	365
153.39	383	159.68	386	166.09	390	11	172.72	393	179.53	396	186.49	399
171.47	415	178.36	418	185.47	422	12	192.76	425	200.18	429	207.67	432
189.89	445	197.45	449	205.20	453	13	213.08	456	221.00	460	228.92	463
208.71	475	216.90	478	225.21	482	14	233.57	486	241.90	489	250.23	492
227.89	503	236.61	507	245.38	510	15	254.12	514	262.85	517	271.61	520
247.32	530	256.48	533	265.62	537	16	274.74	540	283.87	543	293.12	546
266.91	555	276.42	559	285.91	562	17	295.42	565	305.01	568	314.80	571
286.57	579	296.42	583	306.28	586	18	316.22	589	326.34	592	336.71	596
306.29	602	316.49	605	326.76	609	19	337.20	612	347.88	615	358.88	619
326.08	624	336.66	627	347.41	630	20	358.39	634	369.67	638	381.29	641
Age						55	96.24	248	81.43	210	65.7	170
						60	192.76	425	179.53	396	165.48	365
						65	295.42	565	283.87	543	271.61	520
Issue Age 51		Issue Age 52		Issue Age 53		End of Year	Issue Age 54		Issue Age 55		Issue Age 56	
Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up		Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up
0.00	0	0.00	0	0.00	0	1	0.00	0	0.00	0	0.00	0
10.74	30	11.74	32	12.79	33	2	13.90	35	15.07	37	16.33	39
29.73	80	31.41	81	33.14	83	3	34.96	85	36.97	87	39.18	90
49.04	127	51.37	129	53.79	130	4	56.42	133	59.34	135	62.46	138
68.64	172	71.63	174	74.83	176	5	78.34	178	82.14	182	86.06	185
88.53	214	92.28	217	96.32	219	6	100.67	222	105.24	226	109.86	229
108.80	255	113.37	258	118.22	261	7	123.31	264	128.54	268	133.73	271
129.51	295	134.85	298	140.42	301	8	146.13	304	151.91	307	157.68	310
150.60	332	156.63	336	162.80	339	9	169.04	342	175.35	345	181.70	348
171.98	368	178.58	371	185.25	375	10	192.00	378	198.88	381	205.86	384
193.54	403	200.61	406	207.77	409	11	215.05	412	222.52	415	230.23	418
215.17	435	222.71	438	230.37	441	12	238.22	444	246.38	447	254.84	451
236.86	466	244.88	469	253.09	472	13	261.60	475	270.48	479	279.75	483
258.63	495	267.17	498	276.00	501	14	285.21	505	294.86	509	304.92	513
280.51	523	289.65	526	299.15	529	15	309.10	533	319.51	538	330.29	542
302.59	549	312.37	553	322.58	556	16	333.25	561	344.34	565	355.64	570
324.89	575	335.35	578	346.26	582	17	357.58	587	369.16	592	380.80	596
347.45	599	358.58	603	370.11	607	18	381.89	612	393.80	617	405.86	621
370.26	623	381.99	627	393.95	631	19	406.03	636	418.32	640	430.81	645
393.24	645	405.37	650	417.62	654	20	430.07	658	442.75	663	455.65	668
Age						55	0.00	0	N/A	N/A	N/A	N/A
						60	100.67	222	82.14	182	62.46	138
						65	215.05	412	198.88	381	181.7	348
Issue Age 57		Issue Age 58		Issue Age 59		End of Year	Issue Age 60		Issue Age 61		Issue Age 62	
Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up		Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up
0.00	0	0.00	0	0.00	0	1	0.00	0	0.00	0	0.00	0
17.69	41	19.15	43	20.69	45	2	22.32	47	25.89	53	29.84	59
41.49	92	43.84	94	46.18	96	3	48.54	99	52.82	104	57.52	110
65.62	141	68.73	143	71.77	145	4	74.84	147	79.84	153	85.34	159
89.95	187	93.71	190	97.43	192	5	101.23	194	107.01	200	113.41	206
114.36	231	118.76	234	123.17	236	6	127.77	238	134.41	244	141.76	251
138.84	273	143.90	276	149.06	278	7	154.53	281	162.09	287	170.45	294
163.40	313	169.17	315	175.17	318	8	181.57	321	190.09	328	199.45	336
188.10	351	194.66	353	201.55	357	9	208.92	361	218.41	368	228.67	376
213.01	387	220.42	390	228.23	394	10	236.58	398	246.94	405	257.86	413
238.18	421	246.47	425	255.21	429	11	264.44	434	275.44	442	286.86	449
263.64	455	272.81	459	282.40	464	12	292.28	469	303.74	476	315.72	483
289.38	487	299.35	491	309.55	496	13	319.93	501	331.92	508	344.46	516
315.31	518	325.87	522	336.52	527	14	347.45	532	359.99	539	373.07	547
341.23	547	352.20	552	363.37	556	15	374.86	561	387.92	569	401.46	576
366.96	575	378.42	579	390.12	584	16	402.14	590	415.63	597	429.42	604
392.57	601	404.53	606	416.73	611	17	429.21	616	442.93	623	456.75	631
418.09	626	430.51	631	443.14	636	18	455.87	641	469.61	648	483.34	655
443.48	650	456.29	655	469.15	660	19	481.93	665	495.57	672	509.07	678
468.67	673	481.69	678	494.57	683	20	507.29	687	520.68	693	533.91	699
Age						55	N/A	N/A	N/A	N/A	N/A	N/A
						60	N/A	N/A	N/A	N/A	N/A	N/A
						65	101.23	194	79.84	153	57.52	110

Issue Age 63		Issue Age 64		Issue Age 65		End of Year	Issue Age 66		Issue Age 67		Issue Age 68	
Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up		Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up
0.00	0	0.00	0	0.00	0	1	0.00	0	1.36	3	4.19	8
34.02	66	38.45	72	43.18	79	2	48.26	86	53.71	93	59.58	101
62.54	117	67.96	124	73.79	131	3	80.07	138	86.80	146	93.91	155
91.30	166	97.76	173	104.74	181	4	112.24	189	120.13	198	128.21	206
120.36	213	127.92	221	136.05	229	5	144.64	238	153.44	246	162.27	254
149.76	259	158.41	267	167.58	275	6	177.02	284	186.51	292	196.18	301
179.49	302	189.13	311	199.09	319	7	209.17	328	219.44	336	229.95	345
209.44	344	219.82	352	230.38	361	8	241.18	369	252.24	378	263.57	387
239.36	384	250.30	392	261.53	401	9	273.06	409	284.88	418	296.92	426
269.08	421	280.64	430	292.56	438	10	304.79	447	317.26	456	329.78	464
298.66	457	310.87	466	323.43	474	11	336.27	483	349.17	491	361.89	500
328.12	491	340.94	500	354.07	508	12	367.29	517	380.35	525	393.14	533
357.45	524	370.79	532	384.25	541	13	397.60	549	410.69	557	423.37	564
386.54	555	400.18	563	413.75	571	14	427.09	579	440.05	586	452.57	593
415.20	584	428.92	592	442.45	600	15	455.63	607	468.40	614	480.86	620
443.22	612	456.87	619	470.22	626	16	483.19	633	495.87	639	508.22	646
470.47	638	483.92	645	497.04	651	17	509.90	658	522.44	664	534.50	669
496.84	662	510.05	668	523.03	674	18	535.72	681	547.95	686	559.53	692
522.31	684	535.36	690	548.15	696	19	560.52	702	572.25	707	583.18	712
546.98	705	559.83	711	572.28	717	20	584.13	722	595.20	727	605.37	731
N/A	N/A	N/A	N/A	N/A	N/A	Age 55	N/A	N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A	N/A	N/A	60	N/A	N/A	N/A	N/A	N/A	N/A
34.02	66	0.00	0	N/A	N/A	65	N/A	N/A	N/A	N/A	N/A	N/A
Issue Age 69		Issue Age 70		Issue Age 71		End of Year	Issue Age 72		Issue Age 73		Issue Age 74	
Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up		Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up
7.23	13	10.47	18	13.89	23	1	17.53	28	21.43	33	25.60	39
65.88	109	72.60	117	79.75	125	2	87.39	134	95.60	144	104.43	153
101.24	163	108.84	171	117.00	179	3	125.74	189	135.08	198	145.00	209
136.36	214	144.91	222	154.10	231	4	163.91	241	174.26	250	184.97	261
171.32	263	180.84	271	191.03	280	5	201.78	290	212.86	300	224.03	310
206.14	309	216.61	318	227.67	327	6	239.09	337	250.59	346	262.04	355
240.79	353	252.09	362	263.77	371	7	275.56	381	287.29	390	298.83	398
275.18	395	287.04	404	299.06	413	8	311.04	422	322.82	430	334.36	438
309.05	435	321.21	444	333.38	452	9	345.37	460	357.13	468	368.79	476
342.16	472	354.45	481	366.60	488	10	378.54	496	390.38	504	402.09	511
374.37	507	386.62	515	398.69	522	11	410.68	530	422.53	537	434.08	544
405.55	540	417.69	547	429.78	554	12	441.75	561	453.42	568	464.56	574
435.65	571	447.79	578	459.85	584	13	471.61	591	482.85	597	493.37	602
464.82	599	476.90	606	488.73	612	14	500.06	618	510.67	623	520.43	628
493.03	626	504.87	632	516.24	638	15	526.93	643	536.80	648	545.76	652
520.13	651	531.50	657	542.24	662	16	552.18	666	561.24	670	569.41	674
545.94	675	556.67	680	566.66	684	17	575.79	688	584.06	691	591.86	694
570.32	696	580.31	700	589.49	704	18	597.84	707	605.72	710	613.73	714
593.22	716	602.40	720	610.80	723	19	618.74	726	626.80	729	635.33	733
614.62	734	623.02	737	631.00	740	20	639.08	743	647.60	748	657.08	753
N/A	N/A	N/A	N/A	N/A	N/A	Age 55	N/A	N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A	N/A	N/A	60	N/A	N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A	N/A	N/A	65	N/A	N/A	N/A	N/A	N/A	N/A
Issue Age 75		Issue Age 76		Issue Age 77		End of Year	Issue Age 78		Issue Age 79		Issue Age 80	
Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up		Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up
30.06	45	34.81	50	39.82	56	1	45.10	63	50.63	69	56.42	76
113.93	164	124.10	175	134.94	187	2	146.46	199	158.68	212	171.63	225
155.35	219	166.09	230	177.32	241	3	189.02	252	201.34	264	214.51	277
195.84	271	206.94	281	218.34	291	4	230.13	302	242.67	313	255.99	325
235.23	319	246.48	329	257.96	338	5	269.97	348	282.66	359	295.84	371
273.35	364	284.67	373	296.35	382	6	308.51	392	321.08	402	333.83	413
310.18	407	321.68	415	333.49	424	7	345.54	433	357.69	442	369.74	452
345.87	446	357.47	454	369.18	463	8	380.83	471	392.31	479	403.51	487
380.38	483	391.87	491	403.18	498	9	414.19	506	424.85	513	435.13	520
413.54	518	424.64	525	435.33	532	10	445.54	538	455.33	544	464.72	550
445.13	550	455.62	556	465.54	562	11	474.90	567	483.83	573	492.86	578
475.00	580	484.73	585	493.82	590	12	502.35	594	510.93	599	520.35	605
503.06	607	511.98	612	520.26	616	13	528.45	620	537.40	625	547.64	632
529.32	632	537.44	636	545.38	640	14	553.92	644	563.64	651	575.28	659
553.85	655	561.63	659	569.89	663	15	579.16	669	590.21	677	604.19	688
577.15	677	585.22	681	594.16	686	16	604.69	693	617.96	704	636.39	720
599.86	698	608.55	703	618.67	709	17	631.31	719	648.81	734	675.21	760
622.30	718	632.10	725	644.20	734	18	660.85	748	685.94	772	725.50	812
644.92	739	656.58	748	672.49	761	19	696.34	784	733.95	821	795.91	886
668.41	761	683.65	774	706.39	795	20	742.14	831	801.06	892	902.51	1000
N/A	N/A	N/A	N/A	N/A	N/A	Age 55	N/A	N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A	N/A	N/A	60	N/A	N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A	N/A	N/A	65	N/A	N/A	N/A	N/A	N/A	N/A

Method of Calculation	The Guaranteed Values for Cash Values and Reduced Paid-Up Life Insurance are based on the 2001 Commissioner's Standard Ordinary Combined Ultimate Mortality Tables, age last birthday, assuming death occurs at the end of the Policy Year. All values are calculated using a 4.25% interest rate. The Guaranteed Values for any Policy Year not shown will be provided upon request. The Guaranteed Values under this policy are not less than the minimums required by the state in which this policy is issued. The method of computation of Cash Values and the Nonforfeiture Benefit has been filed with as required or requested by the state in which this policy is delivered.
Reserve Basis	The reserves for this policy are calculated using an age last birthday Mortality Table not less than the minimum allowed by the valuation law of the state in which this policy is delivered, and the Commissioners Reserve Valuation Method. The statutory valuation interest rate does not exceed the maximum rate allowed by the valuation law of the state in which this policy is delivered.

POLICY LOANS

Policy Loans	While this policy is In Force, You may take out a loan against the Cash Surrender Value for all or part of the Loan Value Available. This policy is used as sole security for the outstanding Policy Loan. The loan amount requested must be at least \$250. We may defer payment of a Policy Loan for up to six months except to pay premiums.
Loan Value Available	The Loan Value Available is: <ol style="list-style-type: none"> 1. the Cash Surrender Value at the end of the current Policy Year; less 2. all unpaid Premium Payments due before the next Policy Anniversary; less 3. any loan interest that will be due on the next Policy Anniversary.
Policy Loan Balance	The Policy Loan Balance is: <ol style="list-style-type: none"> 1. the sum of Policy Loans taken; plus 2. accrued loan interest; minus 3. the sum of Loan Repayments.
Loan Interest Rate	Interest accrues daily on the Policy Loan. The maximum Loan Interest Rate is eight percent (8%) per year, compounded annually. Interest is due at the end of each Policy Year or, if earlier, on the date of any Policy Loan increase, Policy Loan repayment, Surrender, or activation of a Nonforfeiture Option. Interest not paid when due is added to the Policy Loan and accrues interest. We may change the Loan Interest Rate, but it will never exceed the maximum rate. We will notify You of any increase in Loan Interest Rate at least 30 days before the new rate becomes effective.
Loan Repayment	You may repay all or part of the Policy Loan Balance at any time while this policy is in force. Any Loan Repayment must be for at least \$25 or the Policy Loan Balance, if less.
Unpaid Loans	We will deduct any unpaid Policy Loan Balance from the Cash Surrender Value and Proceeds Payable. Failure to repay a Policy Loan or the loan interest shall not terminate this policy unless the Policy Loan Balance equals or exceeds the Cash Value and not until 31 days after notice is mailed by Us to Your last known address and the last known address of any Assignee.
Automatic Premium Loan	Past due Premium Payments for this policy will be paid automatically by Policy Loan if: <ol style="list-style-type: none"> 1. You made a signed request in the application or before the Grace Period ends; and 2. You have not revoked the Automatic Premium Loan option in writing; and 3. this policy has enough Cash Surrender Value to pay for at least one day's insurance premium. <p>Premium Payments may be resumed at any time while this policy stays In Force under this provision.</p>

SETTLEMENT PRIVILEGES

Settlement

The proceeds of this policy will be paid as a lump sum deposit to a draft account unless otherwise requested.

In lieu of a single lump sum payment, You or the Beneficiary, as appropriate, may select Settlement under a Settlement Option. Any Settlement Option requires the proceeds to be at least \$2,500 and any periodic payments to be at least \$25. The first installment will be due or interest will begin on the date of death.

When You select a Settlement, the Beneficiary may not assign or receive payments before they are due unless expressly authorized by You.

Payee

The Beneficiary is the Payee under the Settlement Option. A Payee may name a contingent Payee to receive any final amount that would otherwise be paid to the estate of the Payee.

Settlement Options

The Settlement Options for this policy are shown below. The amounts and interest rates shown below are based on the guaranteed minimum settlement option interest rate and guaranteed minimum mortality rates. Our current rates may be higher. Information regarding current rates is available from Our Home Office.

For all Settlement Options: If the Payee dies before We have paid all funds available under the chosen Settlement Option, We will pay any remaining amount to the Payee's properly designated contingent Payee or, if no contingent Payee survives the Payee or none is elected, to the estate of the Payee. Annuity benefits at the time of their commencement will not be less than those that would be provided by the application of the Proceeds to purchase a single consideration immediate annuity contract at purchase rates offered by the company at the time to the same class of annuitants whether the annuity benefits are payable in fixed or variable amounts or both.

Interest Accumulation Settlement Option – Proceeds will earn interest at a rate not less than 2.5% per year compounded annually.

The Payee may withdraw these funds at any time. We will not retain these funds under this option longer than five years. However, if the Payee has not reached the age of majority as established by the law in the state in which the Payee resides, We may retain these funds until the Payee attains the age of majority.

If no contingent Payee exists then we will pay the remaining amount to the Payee's estate.

Interest Income Settlement Option – Each \$1,000 of proceeds will yield an income of not less than \$25 annually, \$12.42 semi-annually, \$6.19 quarterly, or \$2.05 monthly.

Unless the Payee has not reached the age of majority as established by the law in the state in which the Payee resides, the Payee may withdraw the proceeds at any time. After the first year, We may defer such withdrawal for up to six months.

Income for a Specified Period Settlement Option (Income Period Certain) – We will pay installments for a specified period. The amount of each installment per \$1,000 of proceeds will not be less than those shown in the table below.

Number of Installments	Amount of Each Monthly Installment	Number of Installments	Amount of Each Monthly Installment
12	\$84.27	96	\$11.46
24	42.66	108	10.31
36	28.78	120	9.39
48	21.85	180	6.64
60	17.69	240	5.27
72	14.92	300	4.46
84	12.94		

Income of a Specified Amount Settlement Option (Income Amount Certain) –

We will pay installments of a specified amount until the proceeds, together with not less than 2.5% interest compounded annually, are paid in full.

Income for Life With a Guaranteed Minimum Number of Installments

Settlement Option (Income Life) – We will pay installments for the lifetime of the Payee but for not less than a guaranteed number of installments. The amount of each installment will depend upon the adjusted age and gender of the Payee at the time the first payment is due. The adjusted age is determined by calculating the age at the nearest birthday of the Payee on the date of the first payment and subtracting a number that depends on the year in which the first payment begins:

First Payment Due	Adjusted Age is Age Minus
Prior to 2011	1
2011 to 2020	2
2021 to 2030	3
2031 to 2040	4
After 2040	5

AMOUNT OF EACH MONTHLY INSTALLMENT (Per \$1,000 of Proceeds)							
Adjusted Age of Male Payee	Number of Installments Guaranteed			Adjusted Age of Female Payee	Number of Installments Guaranteed		
	60	120	240		60	120	240
0	2.42	2.41	2.41	0	2.37	2.37	2.37
1	2.42	2.42	2.42	1	2.38	2.37	2.37
2	2.43	2.43	2.43	2	2.38	2.38	2.38
3	2.44	2.44	2.44	3	2.39	2.39	2.39
4	2.45	2.45	2.45	4	2.40	2.40	2.40
5	2.46	2.46	2.46	5	2.41	2.41	2.41
6	2.47	2.47	2.47	6	2.42	2.42	2.42
7	2.49	2.48	2.48	7	2.43	2.43	2.43
8	2.50	2.50	2.49	8	2.44	2.44	2.44
9	2.51	2.51	2.51	9	2.45	2.45	2.45
10	2.52	2.52	2.52	10	2.46	2.46	2.46
11	2.54	2.54	2.53	11	2.47	2.47	2.47
12	2.55	2.55	2.55	12	2.49	2.49	2.48
13	2.56	2.56	2.56	13	2.50	2.50	2.50
14	2.58	2.58	2.57	14	2.51	2.51	2.51
15	2.59	2.59	2.59	15	2.53	2.53	2.52
16	2.61	2.61	2.60	16	2.54	2.54	2.54
17	2.63	2.63	2.62	17	2.55	2.55	2.55
18	2.64	2.64	2.64	18	2.57	2.57	2.57
19	2.66	2.66	2.65	19	2.58	2.58	2.58
20	2.68	2.68	2.67	20	2.60	2.60	2.60
21	2.70	2.70	2.69	21	2.62	2.62	2.61
22	2.72	2.72	2.71	22	2.63	2.63	2.63
23	2.74	2.74	2.73	23	2.65	2.65	2.65
24	2.76	2.76	2.75	24	2.67	2.67	2.67
25	2.78	2.78	2.77	25	2.69	2.69	2.68
26	2.80	2.80	2.80	26	2.71	2.71	2.70
27	2.83	2.83	2.82	27	2.73	2.73	2.72
28	2.85	2.85	2.84	28	2.75	2.75	2.75
29	2.88	2.88	2.87	29	2.77	2.77	2.77
30	2.91	2.90	2.89	30	2.80	2.80	2.79
31	2.93	2.93	2.92	31	2.82	2.82	2.81
32	2.96	2.96	2.95	32	2.85	2.84	2.84
33	2.99	2.99	2.98	33	2.87	2.87	2.86
34	3.03	3.02	3.01	34	2.90	2.90	2.89
35	3.06	3.06	3.04	35	2.93	2.93	2.92
36	3.09	3.09	3.07	36	2.96	2.96	2.95
37	3.13	3.13	3.11	37	2.99	2.99	2.98
38	3.17	3.17	3.14	38	3.02	3.02	3.01
39	3.21	3.21	3.18	39	3.05	3.05	3.04
40	3.25	3.25	3.22	40	3.09	3.09	3.07
41	3.3	3.29	3.26	41	3.13	3.12	3.11
42	3.34	3.34	3.30	42	3.17	3.16	3.14
43	3.39	3.38	3.34	43	3.21	3.20	3.18
44	3.44	3.43	3.38	44	3.25	3.24	3.22

Adjusted Age of Male Payee	Number of Installments Guaranteed			Adjusted Age of Female Payee	Number of Installments Guaranteed		
	60	120	240		60	120	240
45	3.50	3.49	3.43	45	3.29	3.29	3.26
46	3.55	3.54	3.48	46	3.34	3.33	3.30
47	3.61	3.59	3.53	47	3.39	3.38	3.35
48	3.67	3.65	3.58	48	3.44	3.43	3.39
49	3.73	3.71	3.63	49	3.50	3.49	3.44
50	3.80	3.78	3.69	50	3.55	3.54	3.49
51	3.87	3.85	3.74	51	3.61	3.60	3.54
52	3.94	3.92	3.80	52	3.67	3.66	3.60
53	4.02	3.99	3.86	53	3.74	3.73	3.65
54	4.10	4.07	3.92	54	3.81	3.79	3.71
55	4.19	4.15	3.98	55	3.88	3.86	3.77
56	4.28	4.24	4.05	56	3.96	3.94	3.83
57	4.37	4.33	4.11	57	4.04	4.02	3.90
58	4.47	4.42	4.18	58	4.13	4.10	3.97
59	4.58	4.52	4.24	59	4.22	4.19	4.03
60	4.70	4.63	4.31	60	4.32	4.28	4.10
61	4.82	4.74	4.38	61	4.42	4.38	4.18
62	4.95	4.85	4.45	62	4.53	4.48	4.25
63	5.09	4.98	4.51	63	4.65	4.59	4.32
64	5.23	5.11	4.58	64	4.77	4.71	4.40
65	5.39	5.24	4.65	65	4.90	4.83	4.47
66	5.55	5.38	4.71	66	5.04	4.96	4.54
67	5.73	5.53	4.77	67	5.20	5.09	4.62
68	5.91	5.68	4.83	68	5.36	5.23	4.69
69	6.11	5.83	4.88	69	5.53	5.38	4.76
70	6.32	6.00	4.93	70	5.71	5.54	4.82
71	6.54	6.16	4.98	71	5.91	5.71	4.88
72	6.77	6.33	5.03	72	6.13	5.88	4.94
73	7.01	6.51	5.06	73	6.35	6.06	4.99
74	7.27	6.68	5.10	74	6.60	6.25	5.04
75	7.54	6.86	5.13	75	6.86	6.45	5.08
76	7.83	7.04	5.16	76	7.14	6.64	5.12
77	8.13	7.22	5.18	77	7.43	6.85	5.15
78	8.44	7.40	5.20	78	7.75	7.05	5.18
79	8.77	7.57	5.22	79	8.09	7.26	5.20
80 and over	9.11	7.74	5.24	80 and over	8.44	7.46	5.22

We have the right to require evidence that the Payee is living on the date of any payment made after the guaranteed number of installments.

Farmers New World Life Insurance Company
Policy Specifications

Prepared on [4/1/2011]

Insured: [JOHN DOE] Face Amount: [\$20,000]
Policy Number: [007002219]
Issue Date: [April 1, 2011] Issue Age: [45] Gender: [Male]
Maturity Date: [April 1, 2066]
Policy Owner:
Policy Co-Owner:
Policy Co-Owner:

Premiums	Annual	Semi-Annual	Quarterly	Monthly	[Special Monthly Mode]
Initial Premium Payment	[\$2,430.95]	[\$1,220.48]	[\$612.74]	[\$204.91]	[\$201.91]

[You have selected to pay by Special Monthly Mode.]

[Policy Fee: Annual: \$140.00, Semi-Annual: \$75.00, Quarterly: \$40.00, Monthly: \$14.00, Monthly BCP (EFT): \$11.00]

POLICY DEATH BENEFIT

The Death Benefit payable will be one of the following, depending on the Policy Year in which the Insured dies, unless death is due to suicide in the first two years.

Policy Year 1	[\$1,000]
Policy Year 2	[\$2,000]
Policy Years 3 and later	[\$20,000]

*The term Accidental Bodily Injury excludes certain causes of death which are defined in the Excluded Accidental Causes section of the policy.

SCHEDULE OF BENEFITS

	Amount	Annual Premium	Premium Payable
Life Insurance	[\$20,000]	[\$2,430.95]	To Attained Age 100
TOTAL PREMIUM		[\$2,430.95]	

THIS POLICY HAS A LIMITED GRADED DEATH BENEFIT –
PLEASE READ YOUR CONTRACT CAREFULLY.

This policy contains a Graded Death Benefit clause which means in order to receive the full benefits that this policy offers You must live two Policy Years beyond the Issue Date of this policy.

Farmers New World Life Insurance Company

Mercer Island Life Office: 3003 77th Ave. S.E., Mercer Island, WA 98040-2890 (206) 232-8400
Columbus Life Office: P.O. Box 182325, Columbus, OH 43218-2325 (614) 764-9975



FARMERS
LIFE INSURANCE

Application Number:

Application for Graded Death Benefit Life Insurance

A. Product Information					
Face Amount: \$ _____			Non-Forfeiture Option: <input type="checkbox"/> Reduced Paid-Up Insurance <input type="checkbox"/> Automatic Premium Loan		
B. Proposed Insured					
Name of Proposed Insured (First/Middle/Last/Suffix i.e. Jr., Sr.)				Social Security Number (SSN)	
Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth (mm/dd/yyyy)	U.S. Citizen or Permanent U.S. Resident (Green Card) <input type="checkbox"/> Yes <input type="checkbox"/> No	Primary Language Spoken (if other than English)		
Have you continuously been a resident of the U.S. for at least 12 months immediately preceding this application? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Do you hold a valid U.S. visa that does not expire within the next 30 days?..... <input type="checkbox"/> Yes <input type="checkbox"/> No					
Do you have a visa type of A, B, C, D, F, J or M? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Residence Address (Street, City, State, Zip Code)				Primary Telephone Number	
C. Proposed Policy Owner Complete only if other than the Proposed Insured.					
Name of Proposed Policy Owner (First/Middle/Last/Suffix i.e. Jr., Sr.)			Social Security/Tax ID Number		Date of Birth (mm/dd/yyyy)
Relationship to Proposed Insured: <input type="checkbox"/> Business <input type="checkbox"/> Spouse/Civil Union Partner <input type="checkbox"/> Trust <input type="checkbox"/> Other: _____		Primary Telephone Number		Primary Language Spoken (if other than English)	
Address (Street, City, State, Zip Code)					
If Trust Ownership, Name(s) of Authorized Trustee(s): _____ Trust Date (mm/dd/yyyy): _____					
<input type="checkbox"/> Co-Owner/Name: _____ Date of Birth: _____ Gender <input type="checkbox"/> Male <input type="checkbox"/> Female Address: _____					
<input type="checkbox"/> Successor Owner/Name: _____ Date of Birth: _____ Gender <input type="checkbox"/> Male <input type="checkbox"/> Female Address: _____					
D. Beneficiary					
Primary Beneficiary(ies) Name(s) (First/Middle/Last/Suffix i.e. Jr., Sr.)		% of share (must total 100%)	Date of Birth (mm/dd/yyyy)	Relationship to Proposed Insured	
Contingent Beneficiary(ies) Name(s) (First/Middle/Last/Suffix i.e. Jr., Sr.)		% of share (must total 100%)	Date of Birth (mm/dd/yyyy)	Relationship to Proposed Insured	
If a Testamentary Trust is named as Beneficiary, has a will been established? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Include delay clause? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes," <input type="checkbox"/> 15-day, or indicate number of days: _____ - days (not to exceed 180 days)					
E. Proposed Insured's Other Insurance & Replacement					
If "Yes," to either question below, complete required replacements form(s), if required in the State this application is signed in, and provide details below:					
1. Is there any life insurance policy or annuity contract in-force or application pending on the life of the Proposed Insured? <input type="checkbox"/> Yes <input type="checkbox"/> No					
2. Will any life insurance policy or annuity contract be reduced, replaced, or discontinued; or will payment of premiums be stopped if the insurance applied for is issued? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Name of Company	Insured	Policy Number	Life amount	ADB Amount	To be replaced or changed?
			\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
			\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
F. Questions of Proposed Insured					
1. Are you currently hospitalized or confined to a nursing, long term care or rehabilitation facility? <input type="checkbox"/> Yes <input type="checkbox"/> No					
2. Are you bedridden, or receiving any professional nursing care or health care services in the home?..... <input type="checkbox"/> Yes <input type="checkbox"/> No					
3. Have you been diagnosed as having a terminal disease or illness; or are you receiving oxygen therapy?..... <input type="checkbox"/> Yes <input type="checkbox"/> No					

G. Payment and Billing Information A modal billing fee may apply for payments other than annual.

1. a. Amount paid with this Application \$ _____ b. Draft Initial Premium (BCP/EFT)..... ☐ Yes ☐ No
2. Billing Address: ☐ Same as Proposed Insured's Residence Address
☐ Other (Complete information below, if different from Proposed Insured's Residence Address)
Address (Street, City, State, Zip Code): _____
3. Billing Method (Check one):
☐ Bank Check Plan Monthly EFT Deduction (Complete a Bank Authorization form) ☐ Folio/Agent Payroll Deduction
☐ Direct Bill (select desired frequency) ☐ FIG/Farmers Employee Deduction
☐ Annual ☐ Semi-Annual ☐ Farmers EasyPay, #: _____
☐ Monthly ☐ Quarterly

H. Remarks

Certification and Acknowledgement Signatures

Taxpayer Certification

Under penalties of perjury, I (we), as Proposed Policy Owner(s), certify that:

1. The Social Security Number(s) shown on this form is (are) my (our) correct taxpayer identification number(s) (TIN) (or I (we) am (are) waiting for a number to be issued to me (us)), and ☐ Yes ☐ No
2. I (We) am (are) not subject to backup withholding because: (a) I (we) am (are) exempt from backup withholding, or (b) I (we) have not been notified by the Internal Revenue Service (IRS) that I (we) am (are) subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me (us) that I (we) am (are) no longer subject to backup withholding, and ☐ Yes ☐ No
3. I (We) am (are) a U.S. person(s) (including a U.S. resident alien). ☐ Yes ☐ No

If question 1. above is answered "No," an IRS Form W-9 must be completed, signed and submitted with this Application.

Acknowledgement

I (We) understand that portions or all of the data collected to create this Application for Graded Death Benefit Life Insurance (Application), including my (our) signature(s), may be transmitted by electronic means and/or retained in electronic format. By signing below, I (we) consent to this transaction by electronic means and confirm that I (we) have not withdrawn my (our) consent. I (We) will receive a paper copy of this Application with the Policy Contract, if issued, or upon receipt of a written request directed to Farmers New World Life Insurance Company (FNWL). I (We) have read the completed Application, or have had it read to me (us), and agree that all statements and answers are true and complete to the best of my (our) knowledge and belief and will be relied upon to determine my (our) insurability. I (We) acknowledge that this Application and any application amendments, completed and signed by me (us), are part of the Application and will be attached to, and made part of the Policy Contract, if issued. I (We) understand that receipt of the Application and any attached forms by FNWL does not guarantee a policy will be issued. **I (We) agree that: (1) I (We) will notify FNWL if any statement or answer given in any part of the Application changes prior to delivery of the Policy Contract; and (2) the insurance policy will not begin unless the first modal premium is paid and the Proposed Insured is living and insurable as set forth in applications attached to the Policy Contract when it is delivered to the Policy Owner on or after the issue date.**

I (We) also acknowledge that I (we) have read, or have had read to me (us) and that I (we) understand, the fraud warning and/or other notice listed on Form 31-4226 for my (our) state of residence, if any.

Signed

at

on

Proposed Insured Signature

State

Month, Day, Year

Signed

at

on

Proposed Policy Owner Signature (if other than
Proposed Insured), and title, if applicable

State

Month, Day, Year

Owner's Spouse/Civil Union Partner Signature
(where required in community property states when a
person other than Policy Owner's spouse/civil union
partner is named as Primary Beneficiary)

Policy Co-Owner Signature
and title, if applicable

I certify that I have truly and accurately recorded on this Application the information given by the Proposed Insured, and Proposed Policy Owner(s). To the best of my knowledge, there ☐ Is ☐ Is Not any life insurance policy or annuity contract in-force or application pending on the life of the Proposed Insured. To the best of my knowledge, the life insurance applied for ☐ Is ☐ Is Not intended to replace or reduce current coverage with this or any other company. If a replacement, was sales material used in the solicitation? ☐ Yes ☐ No. If "Yes," you must submit copies of the materials to FNWL and/or the Proposed Policy Owner(s), if applicable, as required by state regulations.

Agent/Insurance Producer Name (please print or type)

Producer Code Number

Agent/Insurance Producer Signature

Date



FARMERS
LIFE INSURANCE

Fraud Warnings and Other Notices

Please review the warning and/or notice applicable to your state, if any.

Arkansas, Louisiana, New Mexico, Rhode Island and West Virginia – Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance, is guilty of a crime and may be subject to fines and confinement in prison.

Colorado – It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado Division of Insurance within the Department of Regulatory Agencies.

District of Columbia – **“WARNING: It is a crime to provide false or misleading information to an insurer for the purpose of defrauding the insurer or any other person. Penalties include imprisonment and/or fines. In addition, an insurer may deny insurance benefits, if false information materially related to a claim was provided by the applicant.”**

Florida – Any person who knowingly and with intent to injure, defraud, or deceive any insurer, files a statement of claim or an application containing false, incomplete, or misleading information is guilty of a felony of the third degree.

Kentucky – Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime.

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Maryland – "Any person who knowingly and willfully presents a false or fraudulent claim for payment of a loss or benefit or knowingly and willfully presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison."

Minnesota Guarantee Association Notice – *This applies only to the variable funds of life and annuity policies: This policy or contract is not protected by the Minnesota Life and Health Insurance Guaranty Association or the Minnesota Insurance Guaranty Association. In the case of insolvency, payment of claims is not guaranteed. Only the assets of this insurer will be available to pay your claim.*

Missouri – Suicide is no defense to payment of life insurance benefits nor is suicide while insane a defense to payment of accidental death benefits, if any, under this policy where the policy is issued to a Missouri citizen, unless the insurer can show that the insured intended suicide when s/he applied for the policy, regardless of any language to the contrary in the policy.

New Jersey – Any person who includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties.

Ohio – Any person who, with intent to defraud or knowing that he/she is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement, is guilty of insurance fraud.

Oklahoma – **WARNING:** Any person who knowingly and with intent to injure, defraud or deceive any insurer, makes any claim for the proceeds of an insurance policy containing any false, incomplete or misleading information is guilty of a felony.

Pennsylvania – “Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties.”

Tennessee, Virginia and Washington – “It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines and denial of insurance benefits.”

Farmers New World Life Insurance Company

Mercer Island Life Office: 3003 77th Ave. S.E., Mercer Island, WA 98040-2890 (206) 232-8400
Columbus Life Office: PO Box 182325, Columbus, OH 43218-2325 (614) 764-9975
Variable Policy Service Office: PO Box 724208, Atlanta, GA 31139 (877) 376-8008

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Columbus Life Office: P.O. Box 182325, Columbus, OH 43218-2325 (614) 764-9975



FARMERS
LIFE INSURANCE

Policy Number: _____

Application for Graded Death Benefit Life Insurance – Amendment

A. Proposed Insured					
Name of Proposed Insured (First/Middle/Last/Suffix i.e. Jr., Sr.) _____					
Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth (mm/dd/yyyy) _____	U.S. Citizen or Permanent U.S. Resident (Green Card) <input type="checkbox"/> Yes <input type="checkbox"/> No			
Have you continuously been a resident of the U.S. for at least 12 months immediately preceding this application? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Do you hold a valid U.S. visa that does not expire within the next 30 days?..... <input type="checkbox"/> Yes <input type="checkbox"/> No					
Do you have a visa type of A, B, C, D, F, J or M? <input type="checkbox"/> Yes <input type="checkbox"/> No					
B. Proposed Insured's Other Insurance & Replacement					
If "Yes," to either question below, complete required replacements form(s), if required in the State this application is signed in, and provide details below:					
1. Is there any life insurance policy or annuity contract in-force or application pending on the life of the Proposed Insured? <input type="checkbox"/> Yes <input type="checkbox"/> No					
2. Will any life insurance policy or annuity contract be reduced, replaced, or discontinued; or will payment of premiums be stopped if the insurance applied for is issued? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Name of Company	Insured	Policy Number	Life Amount	ADB Amount	To be Replaced or Changed?
			\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
			\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
C. Questions of Proposed Insured					
1. Are you currently hospitalized or confined to a nursing, long term care or rehabilitation facility?..... <input type="checkbox"/> Yes <input type="checkbox"/> No					
2. Are you bedridden, or receiving any professional nursing care or health care services in the home? <input type="checkbox"/> Yes <input type="checkbox"/> No					
3. Have you been diagnosed as having a terminal disease or illness; or are you receiving oxygen therapy? <input type="checkbox"/> Yes <input type="checkbox"/> No					
D. Remarks					

Certification and Acknowledgement Signatures

Acknowledgement

I (We) understand that portions or all of the data collected to create this Application for Graded Death Benefit Life Insurance Amendment (Amendment), including my (our) signature(s), may be transmitted by electronic means and/or retained in electronic format. By signing below, I (we) consent to this transaction by electronic means and confirm that I (we) have not withdrawn my (our) consent. I (We) will receive a paper copy of this Amendment with the Policy Contract, if issued, or upon receipt of a written request directed to Farmers New World Life Insurance Company (FNWL). I (We) have read the completed Amendment, or have had it read to me (us), and agree that all statements and answers are true and complete to the best of my (our) knowledge and belief and will be relied upon to determine my (our) insurability. I (We) acknowledge that this Amendment, completed and signed by me (us), is part of the Application and will be attached to, and made part of the Policy Contract, if issued. I (We) understand that receipt of the Amendment and any attached forms by FNWL does not guarantee a policy will be issued. **I (We) agree that: (1) I (We) will notify FNWL if any statement or answer given in any part of the Amendment or Application changes prior to delivery of the Policy Contract; and (2) the insurance policy will not begin unless the first modal premium is paid and the Proposed Insured is living and insurable as set forth in applications attached to the Policy Contract when it is delivered to the Policy Owner on or after the issue date.**

I (We) also acknowledge that I (we) have read, or have had read to me (us) and that I (we) understand, the fraud warning and/or other notice listed on Form 31-4226 for my (our) state of residence, if any.

Signed at _____ Proposed Insured Signature	on _____ State	on _____ Month, Day, Year
Signed at _____ Proposed Policy Owner Signature (if other than Proposed Insured), and title, if applicable	on _____ State	on _____ Month, Day, Year
Owner's Spouse/Civil Union Partner Signature (where required in community property states when a person other than Policy Owner's spouse/civil union partner is named as Primary Beneficiary)		Policy Co-Owner Signature (and title, if applicable)

I certify that I have truly and accurately recorded on this Amendment the information given by the Proposed Insured, and Proposed Policy Owner(s). To the best of my knowledge, there ☐ **Is** ☐ **Is Not** any life insurance policy or annuity contract in-force or application pending on the life of the Proposed Insured. To the best of my knowledge, the life insurance applied for ☐ **Is** ☐ **Is Not** intended to replace or reduce current coverage with this or any other company. If a replacement, was sales material used in the solicitation? ☐ Yes ☐ No. If "Yes," you must submit copies of the materials to FNWL and/or the Proposed Policy Owner(s), if applicable, as required by state regulations.

Agent/Insurance Producer Name (please print or type)	Producer Code Number	Agent/Insurance Producer Signature	Date
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FARMERS
LIFE INSURANCE

Fraud Warnings and Other Notices

Please review the warning and/or notice applicable to your state, if any.

Arkansas, Louisiana, New Mexico, Rhode Island and West Virginia – Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance, is guilty of a crime and may be subject to fines and confinement in prison.

Colorado – It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado Division of Insurance within the Department of Regulatory Agencies.

District of Columbia – **“WARNING: It is a crime to provide false or misleading information to an insurer for the purpose of defrauding the insurer or any other person. Penalties include imprisonment and/or fines. In addition, an insurer may deny insurance benefits, if false information materially related to a claim was provided by the applicant.”**

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Kentucky – Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime.

Maine – It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties may include imprisonment, fines or a denial of insurance benefits.

Maryland – "Any person who knowingly and willfully presents a false or fraudulent claim for payment of a loss or benefit or knowingly and willfully presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison."

Minnesota Guarantee Association Notice – *This applies only to the variable funds of life and annuity policies: This policy or contract is not protected by the Minnesota Life and Health Insurance Guaranty Association or the Minnesota Insurance Guaranty Association. In the case of insolvency, payment of claims is not guaranteed. Only the assets of this insurer will be available to pay your claim.*

Missouri – Suicide is no defense to payment of life insurance benefits nor is suicide while insane a defense to payment of accidental death benefits, if any, under this policy where the policy is issued to a Missouri citizen, unless the insurer can show that the insured intended suicide when s/he applied for the policy, regardless of any language to the contrary in the policy.

New Jersey – Any person who includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties.

Ohio – Any person who, with intent to defraud or knowing that he/she is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement, is guilty of insurance fraud.

Oklahoma – **WARNING:** Any person who knowingly and with intent to injure, defraud or deceive any insurer, makes any claim for the proceeds of an insurance policy containing any false, incomplete or misleading information is guilty of a felony.

Pennsylvania – “Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties.”

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Farmers New World Life Insurance Company

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FARMERS
LIFE INSURANCE

Application for Reinstatement of Graded Death Benefit Life Insurance

A. Insured			
Name of Insured (<i>First/Middle/Last/Suffix i.e. Jr., Sr.</i>)			Policy Number
Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth (<i>mm/dd/yyyy</i>)	U.S. Citizen or Permanent U.S. Resident (Green Card) <input type="checkbox"/> Yes <input type="checkbox"/> No	Primary Language Spoken (<i>if other than English</i>)
Have you continuously been a resident of the U.S. for at least 12 months immediately preceding this application?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you hold a valid U.S. visa that does not expire within the next 30 days?.....			<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have a visa type of A, B, C, D, F, J or M?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Residence Address (<i>Street, City, State, Zip Code</i>)			Primary Telephone Number
B. Policy Owner Complete only if other than the Insured.			
Name of Policy Owner (<i>First/Middle/Last/Suffix i.e. Jr., Sr.</i>)			
Address (<i>Street, City, State, Zip Code</i>)			
C. Questions of Insured			
1. Are you currently hospitalized or confined to a nursing, long term care or rehabilitation facility?.....			<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Are you bedridden, or receiving any professional nursing care or health care services in the home?			<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Have you been diagnosed as having a terminal disease or illness; or are you receiving oxygen therapy?			<input type="checkbox"/> Yes <input type="checkbox"/> No
D. Remarks			

Acknowledgement Signatures

Acknowledgement

I (We) understand that portions or all of the data collected to create this Application for Reinstatement of Graded Death Benefit Life Insurance (Application), including my (our) signature(s), may be transmitted by electronic means and/or retained in electronic format. By signing below, I (we) consent to this transaction by electronic means and confirm that I (we) have not withdrawn my (our) consent. I (We) will receive a paper copy of this Application if reinstatement is approved, or upon receipt of a written request directed to Farmers New World Life Insurance Company (FNWL). I (We) have read the completed Application, or have had it read to me (us), and agree that all statements and answers are true and complete to the best of my (our) knowledge and belief, that they are correctly and fully recorded and that no material information or circumstances has been withheld or omitted. I (we) understand that any reinstatement requested for this policy is not effective until approved by FNWL. I (We) understand and agree that this Application shall become a part of the Policy Contract. I (We) also acknowledge that the reinstated policy may be contested by reason of a fraud or misrepresentation of facts material to this reinstatement for the same period of time following reinstatement with the same conditions and exceptions as the policy provides with respect to contestability after original issuance.

I (We) also acknowledge that I (we) have read, or have had read to me (us) and that I (we) understand, the fraud warning and/or other notice listed on Form 31-4226 for my (our) state of residence, if any.

Signed _____ at _____		on _____
Insured Signature		State Month, Day, Year
Signed _____ at _____		on _____
Policy Owner Signature (if other than Proposed Insured), and title, if applicable)		State Month, Day, Year
Owner's Spouse/Civil Union Partner Signature (where required in community property states when a person other than Policy Owner's spouse/civil union partner is named as Primary Beneficiary)		Policy Co-Owner Signature (and title, if applicable)
Agent/Producer Name (Please print or type)		Agent/Producer Signature
		Producer Code Number



FARMERS
LIFE INSURANCE

Fraud Warnings and Other Notices

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Farmers New World Life Insurance Company

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Columbus Life Office: PO Box 182325, Columbus, OH 43218-2325 (614) 764-9975
Variable Policy Service Office: PO Box 724208, Atlanta, GA 31139 (877) 376-8008

ENDORSEMENT

Pursuant to Your request to exercise the Reduced Paid-Up Life Insurance Nonforfeiture Option, Your policy will continue as Paid-Up Life Insurance effective _____. The Face Amount of the policy has been reduced to \$ _____. Premium Payments are no longer required or allowed.

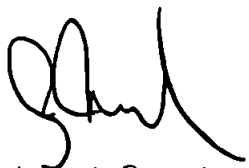
Table of Reduced Paid-Up Cash Values

The Reduced Paid-Up Cash Values are based on the Insured's Attained Age and are for each \$1,000 of Reduced Paid-Up Life Insurance.

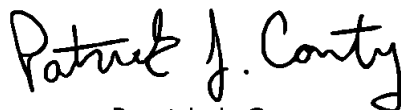
GUARANTEED REDUCED PAID-UP CASH VALUES AT BEGINNING OF POLICY YEAR									
Attained Age	Cash Value	Attained Age	Cash Value	Attained Age	Cash Value	Attained Age	Cash Value	Attained Age	Cash Value
21	N/A	42	N/A	63	495.26	84	787.77	105	920.04
22	N/A	43	N/A	64	509.21	85	799.01	106	923.31
23	N/A	44	N/A	65	523.20	86	809.68	107	926.48
24	N/A	45	276.80	66	537.27	87	819.72	108	929.57
25	N/A	46	286.59	67	551.46	88	829.10	109	932.57
26	N/A	47	296.64	68	565.80	89	837.79	110	935.47
27	N/A	48	307.00	69	580.30	90	845.78	111	938.28
28	N/A	49	317.71	70	594.96	91	853.21	112	941.00
29	N/A	50	328.77	71	609.74	92	860.22	113	943.61
30	N/A	51	340.16	72	624.50	93	866.83	114	946.14
31	N/A	52	351.86	73	639.15	94	873.01	115	948.57
32	N/A	53	363.82	74	653.74	95	878.71	116	950.90
33	N/A	54	376.03	75	668.27	96	884.04	117	953.14
34	N/A	55	388.45	76	682.72	97	889.14	118	955.29
35	N/A	56	401.05	77	697.07	98	893.97	119	957.34
36	N/A	57	413.84	78	711.19	99	898.47	120	959.23
37	N/A	58	426.88	79	724.99	100	902.50	121	1000.00
38	N/A	59	440.19	80	738.42	101	906.15		
39	N/A	60	453.75	81	751.40	102	909.74		
40	N/A	61	467.50	82	763.93	103	913.26		
41	N/A	62	481.35	83	776.06	104	916.69		

Attached to and made a part of this policy, effective as of the effective date of the change to
Reduced Paid-Up Life Insurance.

FARMERS NEW WORLD LIFE INSURANCE COMPANY



Jerry J. Carnahan
President



Patrick J. Carty
Secretary

ENDORSEMENT

Policy Number: _____

Effective _____, the Face Amount for this policy has
been reduced to \$ _____.

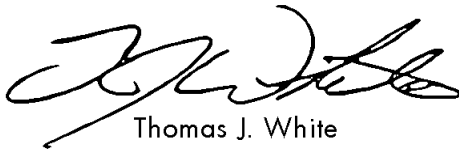
Future premiums for this policy are as shown below:

Mode: _____

Premium: \$ _____

Attached to and made part of this policy, effective as of the effective date of the decrease in Face Amount.

FARMERS NEW WORLD LIFE INSURANCE COMPANY



Thomas J. White
President



John R. Patton
Assistant Secretary

Farmers New World Life Insurance Company
Overflow Addendum



FARMERS
LIFE INSURANCE

Proposed Insured Name:

Policy Number:

Additional Details Continued:

I (We) understand that the information recorded in this Addendum was provided by me (us) in response to the questions in the application. I (We) have reviewed the information recorded and believe that it is true and correct to the best of my (our) knowledge. I (We) understand that the information provided by me (us) in the application process and as recorded on this Addendum will be relied upon by Farmers New World Life Insurance Company to determine the insurability of the Proposed Insured. I (We) acknowledge that this Addendum, completed and signed by me (us), will be attached to and made part of the Policy Contract, if issued.

Proposed Insured Signature (or parent if Proposed Insured is a juvenile) Signed at _____ on _____
State Month, Day, Year

Proposed Policy Owner Signature (if other than Proposed Insured) _____
State Month, Day, Year

Insurance Producer or Witness Signature (if present)

SERFF Tracking Number: FNWW-127093975 State: Arkansas
Filing Company: Farmers New World Life Insurance Company State Tracking Number: 48392
Company Tracking Number: FGDB WHOLE LIFE
TOI: L071 Individual Life - Whole Sub-TOI: L071.211 Early Duration Reduced Benefit -
Single Premium - Any Policy Design
Product Name: Graded Death Benefit Whole Life
Project Name/Number: FGDB Whole Life/

Supporting Document Schedules

	Item Status:	Status Date:
Satisfied - Item: Flesch Certification Comments: Attachment: Flesch Score Certification FGDB.pdf		

	Item Status:	Status Date:
Satisfied - Item: Statement of variability Comments: Attachment: Statement of Variability - FGDB.pdf		

	Item Status:	Status Date:
Satisfied - Item: Certification Comments: Attachment: Certification FGDB.pdf		

	Item Status:	Status Date:
Satisfied - Item: Policyholder Notice Comments: Attachment: AR Policyholder Notice Life.pdf		

	Item Status:	Status Date:
Satisfied - Item: Certification Guaranty Assoc Notice		

SERFF Tracking Number: FNWW-127093975 State: Arkansas
Filing Company: Farmers New World Life Insurance Company State Tracking Number: 48392
Company Tracking Number: FGDB WHOLE LIFE
TOI: L071 Individual Life - Whole Sub-TOI: L071.211 Early Duration Reduced Benefit -
Single Premium - Any Policy Design
Product Name: Graded Death Benefit Whole Life
Project Name/Number: FGDB Whole Life/

Comments:

Attachment:

Certification GUAR DIS.pdf

Item Status:

Status

Date:

Satisfied - Item: red-lined copies of contract due to
objections

Comments:

Attached are the red-lined copies of chnages made to the contract due to your objections. No other changes have been made.

Attachment:

2011-123 - FGDB AR - Redline rev 5-3-11.pdf

Item Status:

Status

Date:

Satisfied - Item: red-lined copy of RPU END due to
corrections

Comments:

Attachment:

2011 RPU END - FGDBWL MIM 6648 Redlined rev 5-23-11.pdf

CERTIFICATION OF READABILITY

I certify that the forms listed below meet the Flesch Score requirements of the Interstate Compact standards.

<u>Form Number</u>	<u>Flesch Score</u>
2011-123	68.98
2011 FGDB APP	61.03
2011 FGDB AMD	69.25
2011 FGDB REINS APP	67.04
2011-123 RPU END	61.34
FA Dec END	74.29
Overflow Addendum	63.83

Signature:

A handwritten signature in black ink, appearing to be 'John Patton', followed by a long horizontal line extending to the right.

Name: John Patton

Title: Vice President of Staff Operations

Date: March 30, 2011

FARMERS NEW WORLD LIFE INSURANCE COMPANY
3003 77th Avenue SE, Mercer island, WA 98040-0290

EXPLANATION OF VARIABILITY

Contact and Applications,

Brackets denote that the text within the brackets is variable subject to the following limitations on each of the forms in this filing:

Policy Face page

- Address and Phone Number- Will insert the company home office address and phone number for sections listed on each form.
- Insured name- will vary in accordance with information provided by the applicant at the time of application
- Policy Number-
- Number of days in Free Look period- The number of days in the Free look period is bracketed as variable so that 30 days will be our standard free look period for all new business and replacement business, unless a greater period is required by the state
- Officer Signatures- To accommodate changes in officer names and titles so that it will be unnecessary to refile the form.

Policy Specifications Page

- Prepared on Date- Will vary in accordance with the policy date of issue or policy change.
- Insured Name, Face Amount, Policy Number, Issue Date, Issue Age and Maturity Date- will vary according to information provided on the application, issue date and term of the plan selected.
- Annual Premium Payments, Semiannual, Quarterly, Monthly and Special Monthly Mode- will vary based upon the option elected by the applicant and if the company has the ability to allow future credit Card payments.
-

Policy fees for this product are: Annual: \$140.00, Semi-Annual: \$75.00, Quarterly: \$40.00, Monthly: \$14.00, Monthly BCP (EFT): \$11.00.

At product implementation, we plan to offer all five billing options noted above. However, the company may only make EFT available to new issues and reinstatements.

Premiums paid will vary based on the amount of coverage selected by the customer.

In the Schedule of benefits: Variability in this section depends on what coverage the insured has selected.

-
-
-

- **Application**
 - Address and Phone Number- This information is variable to accommodate address and telephone number changes without refiling the form.
 - Taxpayer Certification- This section is provided and required by the IRS. The section is bracketed to allow for required wording changes by the IRS on W-9 forms, etc.
 - Fraud Warnings and Other Notices- This information is variable to accommodate fraud warning and other notice changes so such changes required by state law or insurance regulations would not require refiling the form.
 - **Riders and Endorsements**
 - The signature and company address has been bracketed on all riders and endorsements to allow a change of name or address as needed.

**ARKANSAS
Certification**

The undersigned certifies that to the best of his knowledge, information, and belief, the guidelines in Arkansas Bulletin No. 11-83 have been reviewed and that the following forms are in compliance with these guidelines.

The undersigned certifies that to the best of his knowledge, information, and belief, Rule and Regulation 19 has been reviewed and that the following forms are in compliance with this Rule.

Form Number

2011-123

2011 FGDB APP

2011 FGDB AMD

2011 FGDB REINS

2011 RPU END

FA Dec END

Overflow Addendum

A handwritten signature in black ink, appearing to be 'JP', followed by a long horizontal line extending to the right.

Signature:

Name: John Patton

Title: Vice President of Staff Operations

Date: April 6, 2011



Policyholder Notice – Arkansas Act 197 of 1987

For your information the addresses and telephone numbers of your Policy Servicing Office, your insurance agent, and the Arkansas Insurance Department are listed below:

Farmers New World Life Insurance Company
Columbus Life Office
P. O. Box 182325
Columbus Ohio 43218-2325
Telephone: (614) 764-9975

Agent: (aaa

Address: aa
aa
aa

Telephone: @@@@-@@@@-@@@@@

If we at Farmers New World Life Insurance Company fail to provide you with reasonable and adequate service, you should feel free to contact:

Arkansas Insurance Department
1200 West Third Street
Little Rock, Arkansas 72201-1904
Telephone: (501) 371-2640 or (800) 852-5494

Attached to and made a part of this policy effective as of the date of issue of the policy.

FARMERS NEW WORLD LIFE INSURANCE COMPANY


Thomas J. White

Thomas J. White
President

Edward M. Hughes

Brian F. Kregar
Secretary

**ARKANSAS
Certification**

The undersigned certifies that Farmers New World Life Insurance Company complies with the Arkansas Regulation 49 that the Life and Health Guaranty notice is given to each policy owner.

FARMERS NEW WORLD LIFE INSURANCE

Signature:

A handwritten signature in black ink, appearing to be 'JP', followed by a long horizontal line extending to the right.

Name: John Patton

Title: Vice President of Staff Operations

Date: April 6, 2011



FARMERS
LIFE INSURANCE

Farmers New World Life Insurance Company

[Home Office: 3003 77th Ave. S.E., Mercer Island, Washington 98040 / (206)232-8400
Columbus Life Office: 2500 Farmers Drive, Columbus, Ohio 43235 / (614) 764-9975]

A STOCK COMPANY

Insured [JOHN DOE]

[007002209] Policy Number

In the Entire Policy Contract, references to the Policy Owner will be stated as "You" and "Your" and references to Farmers New World Life Insurance Company will be stated as "Us," "We," and "Our."

In consideration of the application and payment of premiums, We insure the person named above as the Insured in accordance with the provisions of this policy and We will pay the Proceeds Payable in the manner provided in the section titled Payment of Proceeds.

This policy's Face Amount, the amount and frequency of the Premium Payment, and other policy data are shown on the Policy Specifications page.

THIS POLICY HAS A LIMITED GRADED DEATH BENEFIT – PLEASE READ YOUR CONTRACT CAREFULLY.

This policy contains a Graded Death Benefit clause which means in order to receive the full benefits that this policy offers You must live two Policy Years beyond the Issue Date of this policy. ~~If death occurs as a result of an Accidental Bodily Injury at any time while this policy is in force, then the Ultimate Face Amount shall be payable. In the first two Policy Years, death from an Excluded Accidental Cause is payable the same as Death from Natural Causes.~~

NOTICE OF YOUR RIGHT TO RETURN THIS POLICY

RIGHT TO EXAMINE PERIOD: This policy may, at any time within [30] days after its receipt by You, be returned for cancellation by delivering it or mailing it along with a signed request for cancellation to an agent of the company, to Our branch office, or to Our Home Office at the address listed above. Such delivery or mailing of this policy and signed request for cancellation shall void this policy from the beginning and the parties shall be in the same position as if no policy had been issued. We will refund all premiums paid, including any fees or charges.

Thomas J. White
President

Brian Kreger
Secretary

Farmers New World Life Insurance Company

**THIS POLICY IS A LEGAL CONTRACT BETWEEN YOU AND US.
READ YOUR POLICY CAREFULLY.**

ALPHABETIC GUIDE TO YOUR POLICY

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DEFINITIONS

This section provides definitions for capitalized terms not defined or explained elsewhere in the Entire Policy Contract.

Assignment	An agreement under which You transfer some or all of Your ownership rights to another party, who is called the Assignee.
Attained Age	The sum of the Issue Age plus the number of Policy Years completed since the Issue Date.
Evidence of Insurability	Information concerning any person to be Insured under this policy, which We deem sufficient to approve an application for this policy or changes to this policy or a Reinstatement of this policy.
Face Amount	An amount chosen by You that is used to calculate premiums and determine the Proceeds Payable. The actual Proceeds Payable paid upon death may be more or less than the Face Amount.
In Force	In effect. An insurance policy that is In Force will provide all rights and benefits available thereunder. If this policy is not In Force there will be no rights or benefits.
Insured	The natural person whose life is covered under this policy.
Issue Age	The Insured's age as of his/her last birthday on this policy's Issue Date.
Issue Date	The effective date for the insurance coverage under this policy, provided the first Premium Payment has been made and all policy issue requirements have been received by Us. Policy Months, Years, and Anniversaries are measured from the Issue Date, which is shown on the Policy Specifications page.
Lapse	The termination of this policy due to nonpayment of sufficient Premium Payments or loan repayments. A policy that has Lapsed provides no further benefit.
Maturity Date	The Maturity Date of this policy is the Policy Anniversary when the Insured's Attained Age is 121.
Monthly Policy Date	The same day each month as the Issue Date for each succeeding month.
Natural Causes	Any cause of death that is not: 1. a suicide, or 2. an accident, unless it is an Excluded Accidental Cause. Excluded Accidental Causes shall be considered Natural Causes.
Policy Anniversary	The same day and month as the Issue Date for each succeeding year this policy remains In Force.
Policy Month	The period from one Monthly Policy Date (or from the Issue Date) to the next Monthly Policy Date.
Policy Year	The period from one Policy Anniversary (or from the Issue Date) to the next Policy Anniversary.
Premium Due Date	The day of each month on which Your Premium Payment becomes due. The Premium Due Date is the same day of the month as the Issue Date.

GENERAL PROVISIONS

Entire Policy Contract	<p>The Entire Policy Contract is:</p> <ol style="list-style-type: none">1. this policy;2. any attached applications;3. any attached amendments and supplements to the applications;4. any attached endorsements;5. any attached Reinstatement applications;6. any attached application for changes;7. any revised Policy Specifications page issued by Us; and8. any document We send You with instructions to attach it to Your policy.
Change of Contract	<p>Any change in the terms of the Entire Policy Contract must be in writing and signed by one of Our officers. A change can be in the form of an endorsement, or an amendment or supplement to an application. A copy of the change will be attached to this policy or will be sent to You to attach to Your policy. No insurance producer has the authority to change any terms or conditions of the Entire Policy Contract.</p>
Incontestability	<p>We rely on the statements made in any applications for this policy. We also rely on statements made in any amendments and supplements to applications. In the absence of fraud, statements made in any applications or in any amendments or supplements to applications are deemed representations and not warranties.</p> <p>In addition to any other reasons permitted by law, We can contest the validity of this policy, or any Reinstatement of this policy, if:</p> <ol style="list-style-type: none">1. any material misrepresentation of fact is made in any applications or any amendments or supplements to applications; and2. a copy of the applications or amendments or supplements to applications is attached to this policy when issued or later made a part of this policy after the Issue Date. <p>Except for Reinstatements, We will not contest this policy after it has been In Force during the lifetime of the Insured for two years after the Issue Date. If this policy is Reinstated, We will not contest this policy based upon any statements on the Reinstatement application after it has been In Force during the lifetime of the Insured for two years after the effective date of Reinstatement.</p>
Suicide	<p>If, within two years after the Issue Date, the Insured dies by suicide, while sane or insane, We will limit the Proceeds Payable to the Premium Payments made minus any Policy Loans taken.</p>
Misstatement of Age or Gender	<p>If the Insured's age or gender was misstated, We will adjust the Proceeds Payable. The adjusted Proceeds Payable will be that which the most recent Premium Payments made would have purchased at the correct age or gender.</p> <p>Proof of age or gender may be filed with Us at any time. Once the Insured's age or gender is established to Our satisfaction, We will use this age or gender in any settlement.</p>
Internal Revenue Code	<p>This policy is intended to qualify as life insurance under the Internal Revenue Code. Accordingly, the provisions of this policy are to be interpreted and will be administered by Us to ensure such tax qualification.</p>
Conformity to State Laws	<p>This policy is subject to the laws of the state in which it is issued. Any terms which are in conflict with these laws are amended to conform.</p>
Nonparticipating	<p>This policy is Nonparticipating. It does not share in Our surplus earnings.</p>
Claims of Creditors	<p>To the extent allowed by law, no benefits of this policy will be subject to any claim of legal process by any creditor.</p>

OWNERSHIP

Policy Owner	The Policy Owner of this policy is the Insured unless: <ol style="list-style-type: none">1. another natural person or entity has been named as Policy Owner in the application; or2. a new Policy Owner is named in accordance with the Change of Policy Owner section.
Rights of Policy Owner	During the lifetime of the Insured, the Policy Owner may exercise all rights and privileges provided in this policy.
Policy Co-Owner	More than one natural person or entity may be named as the Policy Owner in accordance with the Change of Policy Owner section. Such natural persons or entities shall serve as Policy Co-Owners and shall act jointly to exercise all the rights of the Policy Owner. If a Policy Co-Owner dies during the Insured's lifetime and no Successor Owner for the deceased Policy Co-Owner has been named, the remaining Policy Co-Owner(s) shall become the Policy Owner(s).
Successor Owner	During the Insured's lifetime, the Policy Owner may name a Successor Owner to become the Policy Owner upon the Policy Owner's death. If no Successor Owner is named or the Successor Owner and Policy Owner both die before the Insured and no other Change of Policy Owner has been made, then the Insured will become the Policy Owner, unless the Insured has not reached the age of majority as established by the laws in the state in which the Insured resides, in which case the Beneficiary, in order from primary to contingent, if any is living, will become the Policy Owner(s).
Change of Policy Owner	The Policy Owner may name a new Policy Owner, add a Policy Owner to establish Policy Co-Owners, or name a Successor Owner by notifying Us in writing while the Insured is alive, subject to any existing Assignment. When We receive acceptable signed notice, the change will take effect on the date the notice was signed. The change is subject to any action We may have taken before receiving the notice.
Assignment	The Policy Owner may assign this policy. We are not bound by an Assignment unless the Assignment forms executed by the Policy Owner are recorded by Us. The Assignment shall take effect on the date the notice of Assignment is signed by the Policy Owner, subject to any payments made, or actions taken by the company prior to receipt of the notice. We are not responsible for the validity of an Assignment.

BENEFICIARY

Beneficiary Designation	The Beneficiary is the natural person(s) or the entity(ies) named to receive the Proceeds Payable at the Insured's death. The Beneficiary is as named in the application or as changed by Your signed request while the Insured is living.
Change of Beneficiary	You may change the Beneficiary at any time before the Insured dies, subject to the rights of any Assignee or Irrevocable Beneficiary. You must sign any change request and it must be recorded by Us to be effective. The change request must be signed before the Insured's death but may be recorded by Us after the Insured's death. The change will take effect on the date it was signed, subject to any payment We make or any action taken by Us before We receive the request.
Delay Clause	This is an optional clause. If requested, this clause provides that, if the Beneficiary dies within a specified number of days following the Insured's death (not including the date of death), the Proceeds Payable will be paid as if the Beneficiary died before the Insured. The specified number of days cannot exceed 180. You may request a Delay Clause in the application or in any acceptable signed request recorded by Us while the Insured is living. If a Delay Clause is requested and a number of days is not specified, the default is 15 days.

DEATH BENEFIT

Death Benefit	The Death Benefit payable depends on the cause of death and the Policy Year in which the Insured dies.
Graded Death Benefit	A Death Benefit that is limited to the portion of premiums actually paid, that were due through the end of the Policy Month of the Insured's death, multiplied by 1.75% of the Face Amount of the Policy when the Insured dies in Policy Year 1, or 10% of the Face Amount of the Policy when the Insured dies in Policy Year 2.
Ultimate Face Amount Policy Years 1 & 2	<p>The Face Amount of the Policy.</p> <p>Death from Accidental Bodily Injury</p> <p>If the Insured dies from Accidental Bodily Injury in any Policy Year, the Death Benefit is the Policy's Ultimate Face Amount.</p> <p>The Accidental Bodily Injury must:</p> <ol style="list-style-type: none">1. be the direct result of an accident that occurs while this policy is In Force; and2. result in death, within 180 days, independent of disease or bodily or mental illness or infirmity or any other cause (except for sickness caused by accidental bodily injury); and3. not be an Excluded Accidental Cause. <p>Death from Natural Causes</p> <p>If the Insured dies from Natural Causes in the first or second Policy Year, the Death Benefit is the Graded Death Benefit.</p>
Policy Year 3 or Later	<p>Reduced Death Benefits during the first two Policy Years are only applicable to death from Natural Causes.</p> <p>Death from any Cause</p> <p>In the third Policy Year or later, the Death Benefit for any cause of death is the Ultimate Face Amount.</p>
Excluded Accidental Causes	<p>Exclusions during the first two Policy Years that do not qualify for the Ultimate Face Amount:</p> <ol style="list-style-type: none">1. death caused or contributed to by disease or infirmity of mind or body, or medical or surgical treatment for such disease or infirmity;2. an infection not occurring as a direct result or consequence of the Accidental Bodily Injury;3. death caused or contributed to by travel in or descent from an aircraft, if the Insured acted in a capacity other than as a passenger;4. death caused or contributed to by travel in an aircraft or device used for testing or experimental purposes, or used by or for any military authority, or used for travel beyond the earth's atmosphere;5. death caused or contributed to by war or act of war.6. death caused or contributed to by active participation in a riot, insurrection or terrorist activity;7. death occurring while the Insured is incarcerated;8. death caused or contributed to by committing or attempting to commit a felony;9. death caused or materially contributed to by voluntary intake or use by any means of:<ol style="list-style-type: none">a) any drug, unless prescribed or administered by a physician and taken in accordance with the physician's instructions; orb) poison, gas or fumes, unless a direct result of an occupational accident;10. death caused or contributed to by intoxication as defined by the jurisdiction where the accident occurred;11. death caused or contributed to by riding or driving an air, land or water vehicle in a race, speed or endurance contest;12. death caused or contributed to by bungee jumping;13. Death caused or materially contributed to by participation in an illegal occupation or activity;14. death caused or contributed to by rock or mountain climbing; and/or15. death caused or contributed to by aeronautics (hang gliding, skydiving, parachuting, ultralight, soaring, ballooning and parasailing);

PAYMENT OF PROCEEDS

Proceeds

If the Insured dies while this policy is In Force, We will pay the Proceeds Payable within 30 days after Our receipt of satisfactory proof of death, to the Beneficiary as described below, subject to Our rights to investigate any claim under this policy, and subject to the Incontestability provision or any Assignment of this policy:

1. to any primary Beneficiary;
2. if no primary Beneficiary survives the Insured, We will pay the Proceeds Payable to any contingent Beneficiary who survives the Insured. Unless otherwise specified, the interest of any Beneficiary who dies before the Insured will pass to any Beneficiary in the same class (that is primary or contingent) who survives the Insured; and
3. if no Beneficiary survives the Insured, We will pay the Proceeds Payable to the Policy Owner or the Policy Owner's estate.

Payment will be made as a lump sum deposit to a draft account unless otherwise requested in writing signed by the Beneficiary.

Proceeds Payable

The Proceeds Payable are:

1. the Death Benefit; plus
2. any part of Premium Payments made beyond the Policy Month of the Insured's death; less
3. any Policy Loans and accrued loan interest; less
4. any Premium Payments due and unpaid at the date of death; less
5. any Surrender proceeds previously paid.

Interest on the Proceeds Payable

We shall pay interest on the Proceeds Payable from the date of death to the date of payment. The interest shall be the current rate of interest on proceeds left on deposit, plus additional interest at a rate of 10% annually, until the date the claim is paid, beginning 30 calendar days from the latest of:

1. the date We receive satisfactory proof of death;
2. the date We receive sufficient information to determine our liability, the extent of the liability, and the appropriate payee legally entitled to the Proceeds Payable; and
3. the date that legal impediments to payment of proceeds that depend on the action of parties other than Us are resolved and sufficient evidence of the same is provided to Us. Legal impediments to payment include, but are not limited to:
 - a) the establishment of guardianships and conservatorship;
 - b) the appointment and qualification of trustees, executors and administrators; and
 - c) the submission of information required to satisfy state and federal reporting requirements.

Duty to Cooperate

You and any Beneficiary or other claimant shall at all times fully cooperate with Us in Our review and investigation of any claim for benefits under this policy, and You and any Beneficiary or claimant shall provide Us with any information and assistance We may reasonably request to enable Us to pay any Proceeds Payable in a timely manner.

We reserve the right, at Our expense, to require an autopsy unless prohibited by law.

PREMIUMS AND REINSTATEMENTS

Premium Payments	<p>The first Premium Payment is due on the Policy Issue Date and must be paid before coverage begins. Subsequent premiums are payable in advance of the period they are to cover to Us at Our Home Office or to one of Our authorized agents. Premium Payments are not required or allowed at or beyond the Insured's Attained Age 100. Your premiums are payable in U.S. currency. We will provide a receipt upon request.</p> <p>Other than the first initial premium payment, all subsequent premiums will be payable by Monthly Electronic Funds Transfer.</p>
Grace Period	<p>We allow a grace period of 31 days following the Premium Due Date of each Premium Payment. This policy will remain In Force during the Grace Period. If the Premium Payment due is not paid by the end of the 31-day Grace Period, this Entire Policy Contract will Lapse except as provided in the Nonforfeiture Option Section.</p> <p>If the Insured dies during the Grace Period, the Proceeds Payable will reflect any overdue Premium Payments.</p>
Reinstatement	<p>This policy may be Reinstated within three years of entering a Grace Period that ends with a subsequent Lapse in coverage or within three years of exercising the Reduced Paid-Up Life Insurance Nonforfeiture Option. Reinstatement is not allowed if this policy has been Surrendered.</p> <p>We will Reinstatate any Policy Loan Balance outstanding on the date of Lapse or on the date the Reduced Paid-Up Life Insurance Nonforfeiture Option was exercised.</p> <p>To Reinstatate this policy, You must:</p> <ol style="list-style-type: none">1. provide Evidence of Insurability sufficient to demonstrate that there has been no material change in the health of the Insured covered under this policy since the Issue Date;2. pay past due Premium Payments plus interest at a rate specified by us, not to exceed 6% per year compounded annually;3. pay accrued loan interest from the date of Lapse or the date the Reduced Paid-Up Life Insurance Nonforfeiture Option was exercised to the next Policy Anniversary; and4. complete the appropriate company authorization to pay all future premiums by Monthly Electronic Funds Transfer. <p>The effective date of the Reinstatement will be the date the Reinstatement application is approved by Us, provided that all above requirements have been satisfied and provided the Insured is living on that date. The Incontestability provision of this contract is effective for two years from the effective date of Reinstatement.</p>
Automatic Reinstatement	<p>We will automatically Reinstatate this policy within 20 days after the end of the Grace Period if We receive all past due Premium Payments while the Insured is living.</p>

CASH VALUE AND CASH SURRENDER VALUE

Cash Value	<p>If You have not exercised the Nonforfeiture Option, the Cash Value of this policy is the Cash Value shown in the Table of Guaranteed Values, adjusted to reflect premiums due and paid since the most recent Policy Anniversary.</p>
Cash Surrender Value	<p>The Cash Surrender Value is:</p> <ol style="list-style-type: none">1. the Cash Value; less2. any outstanding Policy Loans and accrued loan interest; plus3. any Premium Payments we have received that have not become due.

Cash Surrender

On any date that this policy has a Cash Surrender Value, as defined in the Cash Surrender Value section, You may Surrender this policy for the Cash Surrender Value after We receive Your signed request together with this policy. If this policy is surrendered within 30 days following a Policy Anniversary the value available shall not be less than the anniversary value. We have the right to defer payment for up to six months or the period allowed by law, if less. If You Surrender this policy prior to the Insured's Attained Age 100 and this policy is not within a Grace Period, this policy will terminate the first Monthly Policy Date on or after the Surrender. If You Surrender this policy during a Grace Period or at the Insured's Attained Ages 100 through 120, this policy will terminate on the date of the Surrender.

Maturity

If this policy is In Force on the Maturity Date, the Cash Surrender Value will be sent to the Policy Owner, this policy will terminate, and all coverage under the Entire Policy Contract will end.

NONFORFEITURE OPTION

If You stop making Premium Payments after Your policy has a Cash Value, You may exercise the Nonforfeiture Option subject to the terms below.

Reduced Paid-Up Life Insurance

This policy may continue as Paid-Up Life Insurance for a reduced Face Amount. On the date this option is exercised, the Cash Surrender Value will be used as a net single premium at the Insured's Attained Age to determine the Face Amount of the Reduced Paid-Up Life Insurance. Since any Policy Loan outstanding on the date this option is exercised, together with accrued interest, will be deducted in calculating the Reduced Paid-Up Life Insurance, the Policy Loan outstanding on the option exercise date will be considered as fully repaid and will not be deducted again from any Proceeds Payable. New Policy Loans taken after the option is exercised will be deducted from any Proceeds Payable.

Reduced Paid-Up Life Insurance will have its own Cash Surrender and Policy Loan privileges. If the Reduced Paid Up Life Insurance is Surrendered, this policy will terminate on the date of the Surrender.

Activation of Option

You may exercise the Nonforfeiture Option no later than 60 days after the premium due date, by sending Us a signed request. However, the Reduced Paid-Up Life Insurance Nonforfeiture Option can only be exercised before the Insured reaches Attained Age 100. At the end of a Grace Period, if Your policy has a Cash Surrender Value and the Automatic Premium Loan provision is not in effect, We will automatically exercise the Nonforfeiture Option.

GUARANTEED VALUES

The Guaranteed Values for this policy are determined by the Issue Age and gender of the Insured, and by the number of Policy Years that Premium Payments have been made. These values assume Premium Payments are made to the end of the Policy Year and that no Policy Loan exists on this policy. The Cash Values and amounts of Reduced Paid-Up Life Insurance are for each \$1,000 of Face Amount.

Cash Surrender

On any date that this policy has a Cash Surrender Value, as defined in the Cash Surrender Value section, You may Surrender this policy for the Cash Surrender Value after We receive Your signed request together with this policy. If this policy is surrendered within 30 days following a Policy Anniversary the value available shall not be less than the anniversary value. We have the right to defer payment for up to six months or the period allowed by law, if less. If You Surrender this policy prior to the Insured's Attained Age 100 and this policy is not within a Grace Period, this policy will terminate the first Monthly Policy Date on or after the Surrender. If You Surrender this policy during a Grace Period or at the Insured's Attained Ages 100 through 120, this policy will terminate on the date of the Surrender.

Maturity

If this policy is In Force on the Maturity Date, the Cash Surrender Value will be sent to the Policy Owner, this policy will terminate, and all coverage under the Entire Policy Contract will end.

NONFORFEITURE OPTION

If You stop making Premium Payments after Your policy has a Cash Value, You may exercise the Nonforfeiture Option subject to the terms below.

Reduced Paid-Up Life Insurance

This policy may continue as Paid-Up Life Insurance for a reduced Face Amount. On the date this option is exercised, the Cash Surrender Value will be used as a net single premium at the Insured's Attained Age to determine the Face Amount of the Reduced Paid-Up Life Insurance. Since any Policy Loan outstanding on the date this option is exercised, together with accrued interest, will be deducted in calculating the Reduced Paid-Up Life Insurance, the Policy Loan outstanding on the option exercise date will be considered as fully repaid and will not be deducted again from any Proceeds Payable. New Policy Loans taken after the option is exercised will be deducted from any Proceeds Payable.

Reduced Paid-Up Life Insurance will have its own Cash Surrender and Policy Loan privileges. If the Reduced Paid Up Life Insurance is Surrendered, this policy will terminate on the date of the Surrender.

Activation of Option

You may exercise the Nonforfeiture Option no later than 60 days after the premium due date, by sending Us a signed request. However, the Reduced Paid-Up Life Insurance Nonforfeiture Option can only be exercised before the Insured reaches Attained Age 100. At the end of a Grace Period, if Your policy has a Cash Surrender Value and the Automatic Premium Loan provision is not in effect, We will automatically exercise the Nonforfeiture Option.

GUARANTEED VALUES

The Guaranteed Values for this policy are determined by the Issue Age and gender of the Insured, and by the number of Policy Years that Premium Payments have been made. These values assume Premium Payments are made to the end of the Policy Year and that no Policy Loan exists on this policy. The Cash Values and amounts of Reduced Paid-Up Life Insurance are for each \$1,000 of Face Amount.

TABLE OF GUARANTEED VALUES

Issue Age 45		Issue Age 46		Issue Age 47		End of Year	Issue Age 48		Issue Age 49		Issue Age 50	
Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up		Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up
0.00	0	0.00	0	0.00	0	1	0.00	0	0.00	0	0.00	0
5.73	20	6.40	21	7.13	23	2	7.91	25	8.73	26	9.58	28
20.37	67	21.77	69	23.23	71	3	24.75	73	26.30	75	27.87	77
35.52	112	37.63	115	39.81	118	4	42.04	120	44.28	122	46.53	124
51.16	156	53.96	159	56.83	162	5	59.72	165	62.62	167	65.51	169
67.26	198	70.73	202	74.24	205	6	77.78	207	81.28	210	84.77	212
83.80	239	87.89	242	92.02	245	7	96.13	248	100.22	250	104.32	253
100.71	277	105.40	281	110.09	284	8	114.76	287	119.44	289	124.24	292
117.98	314	123.21	318	128.43	321	9	133.67	323	139.02	326	144.58	329
135.53	349	141.28	353	147.05	356	10	152.93	359	159.02	362	165.31	365
153.35	383	159.62	386	166.01	389	11	172.61	393	179.40	396	186.32	399
171.43	415	178.31	418	185.39	422	12	192.66	425	200.05	428	207.50	432
189.86	445	197.40	449	205.13	453	13	212.98	456	220.88	459	228.76	462
208.68	475	216.84	478	225.14	482	14	233.47	486	241.77	489	250.08	492
227.85	503	236.56	507	245.31	510	15	254.03	513	262.73	516	271.47	519
247.29	529	256.43	533	265.55	537	16	274.65	540	283.76	543	292.97	546
266.88	555	276.37	559	285.85	562	17	295.33	565	304.90	568	314.66	571
286.54	579	296.37	583	306.22	586	18	316.13	589	326.23	592	336.58	595
306.26	602	316.44	605	326.69	609	19	337.12	612	347.77	615	358.75	619
326.05	624	336.62	627	347.35	630	20	358.31	634	369.57	637	381.16	641
Age						Age						
135.53	349	123.21	318	110.09	284	55	96.13	248	81.28	210	65.51	169
227.85	503	216.84	478	205.13	453	60	192.66	425	179.40	396	165.31	365
326.05	624	316.44	605	306.22	586	65	295.33	565	283.76	543	271.47	519
Issue Age 51		Issue Age 52		Issue Age 53		End of Year	Issue Age 54		Issue Age 55		Issue Age 56	
Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up		Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up
0.00	0	0.00	0	0.00	0	1	0.00	0	0.00	0	0.00	0
10.46	29	11.38	31	12.32	32	2	13.31	34	14.34	35	15.46	37
29.46	79	31.05	80	32.68	82	3	34.38	84	36.26	85	38.33	88
48.78	126	51.03	128	53.34	129	4	55.86	131	58.65	134	61.63	136
68.38	171	71.29	173	74.40	175	5	77.79	177	81.46	180	85.25	183
88.28	214	91.95	216	95.90	218	6	100.14	221	104.58	224	109.07	227
108.56	255	113.04	257	117.81	260	7	122.79	263	127.89	266	132.96	269
129.27	294	134.54	297	140.02	300	8	145.62	303	151.28	306	156.93	309
150.37	332	156.32	335	162.40	338	9	168.54	341	174.74	344	180.98	346
171.75	368	178.28	371	184.87	374	10	191.52	377	198.28	379	205.16	382
193.31	402	200.32	405	207.40	408	11	214.58	411	221.95	414	229.54	417
214.95	435	222.43	437	230.01	440	12	237.77	443	245.82	446	254.18	450
236.65	465	244.61	468	252.74	471	13	261.16	474	269.94	478	279.11	481
258.42	494	266.90	497	275.66	500	14	284.78	504	294.34	508	304.31	512
280.31	522	289.40	525	298.83	529	15	308.68	532	319.00	537	329.70	541
302.39	549	312.12	552	322.26	556	16	332.85	560	343.86	564	355.06	569
324.70	574	335.11	578	345.95	582	17	357.20	586	368.69	591	380.26	595
347.27	599	358.35	603	369.82	607	18	381.52	611	393.35	616	405.33	621
370.08	623	381.76	627	393.66	631	19	405.68	635	417.89	640	430.31	644
393.07	645	405.16	649	417.35	653	20	429.73	658	442.34	662	455.17	667
Age						Age						
48.78	126	31.05	80	12.32	32	55	0.00	0	N/A	N/A	N/A	N/A
150.37	332	134.54	297	117.81	260	60	100.14	221	81.46	180	61.63	136
258.42	494	244.61	468	230.01	440	65	214.58	411	198.28	379	180.98	346
Issue Age 57		Issue Age 58		Issue Age 59		End of Year	Issue Age 60		Issue Age 61		Issue Age 62	
Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up		Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up
0.00	0	0.00	0	0.00	0	1	0.00	0	0.00	0	0.00	0
16.67	38	17.96	40	19.29	42	2	20.79	44	24.13	49	27.61	55
40.50	90	42.68	92	44.83	94	3	47.06	96	51.11	101	55.35	106
64.65	139	67.60	141	70.45	143	4	73.40	145	78.18	150	83.24	155
89.00	185	92.61	187	96.14	189	5	99.83	191	105.39	197	111.37	202
113.44	230	117.69	232	121.92	234	6	126.41	236	132.84	241	139.79	248
137.94	271	142.86	274	147.85	276	7	153.21	278	160.57	284	168.54	291
162.53	311	168.16	313	173.99	316	8	180.29	319	188.63	326	197.61	333
187.25	349	193.69	352	200.41	355	9	207.69	358	217.00	365	226.90	373
212.19	385	219.47	388	227.13	392	10	235.39	396	245.58	403	256.16	411
237.39	420	245.56	424	254.15	428	11	263.29	432	274.13	439	285.22	447
262.87	453	271.93	458	281.37	462	12	291.18	467	302.48	474	314.14	481
288.64	486	298.50	490	308.57	495	13	318.87	499	330.71	506	342.96	514
314.60	516	325.05	521	335.58	526	14	346.43	530	358.83	537	371.63	545
340.54	546	351.42	550	362.47	555	15	373.89	560	386.81	567	400.08	574
366.30	574	377.66	578	389.25	583	16	401.21	588	414.57	595	428.11	602
391.94	600	403.80	605	415.90	610	17	428.32	615	441.92	622	455.50	629
417.48	625	429.82	630	442.34	635	18	455.02	640	468.65	647	482.15	653
442.90	649	455.63	654	468.39	659	19	481.13	664	494.66	670	507.94	676
468.12	672	481.06	677	493.85	682	20	506.52	686	519.82	692	532.84	698
Age						Age						
N/A	N/A	N/A	N/A	N/A	N/A	55	N/A	N/A	N/A	N/A	N/A	N/A
40.50	90	17.96	40	0.00	0	60	N/A	N/A	N/A	N/A	N/A	N/A
162.53	311	142.86	274	121.92	234	65	99.83	191	78.18	150	55.35	106

Issue Age 63		Issue Age 64		Issue Age 65		End of Year	Issue Age 66		Issue Age 67		Issue Age 68	
Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up		Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up
0.00	0	0.00	0	0.00	0	1	0.00	0	0.00	0	2.11	4
31.26	60	35.11	66	39.22	72	2	43.35	77	47.75	83	52.45	89
59.86	112	64.72	118	69.95	124	3	75.32	130	81.05	137	87.04	143
88.71	161	94.63	168	101.03	175	4	107.65	181	114.59	188	121.60	195
117.85	209	124.89	216	132.46	223	5	140.23	230	148.11	238	155.92	244
147.34	254	155.49	262	164.13	270	6	172.77	277	181.39	284	190.09	291
177.15	298	186.31	306	195.77	314	7	205.09	321	214.53	329	224.12	336
207.18	340	217.11	348	227.19	356	8	237.26	363	247.53	371	257.99	378
237.19	380	247.70	388	258.47	396	9	269.31	403	280.38	411	291.59	419
266.99	418	278.15	426	289.62	434	10	301.20	442	312.97	449	324.70	457
296.66	454	308.47	462	320.63	470	11	332.85	478	345.07	486	357.06	493
326.20	489	338.66	497	351.39	505	12	364.02	512	376.45	520	388.54	527
355.61	521	368.60	529	381.70	537	13	394.49	545	406.98	552	419.00	558
384.79	553	398.10	560	411.32	568	14	424.14	575	436.52	581	448.42	587
413.53	582	426.94	589	440.14	597	15	452.82	603	465.06	609	476.93	615
441.63	610	454.99	617	468.02	623	16	480.53	630	492.70	635	504.50	641
468.96	636	482.13	642	494.96	648	17	507.37	654	519.43	660	530.98	665
495.40	660	508.35	666	521.05	672	18	533.32	677	545.11	683	556.20	687
520.94	682	533.75	688	546.28	694	19	558.25	699	569.56	704	580.03	708
545.69	704	558.30	709	570.51	715	20	581.99	719	592.66	723	602.40	727
N/A	N/A	N/A	N/A	N/A	N/A	Age	N/A	N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A	N/A	N/A	55	N/A	N/A	N/A	N/A	N/A	N/A
31.26	60	0.00	0	N/A	N/A	60	N/A	N/A	N/A	N/A	N/A	N/A
				N/A	N/A	65	N/A	N/A	N/A	N/A	N/A	N/A
Issue Age 69		Issue Age 70		Issue Age 71		End of Year	Issue Age 72		Issue Age 73		Issue Age 74	
Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up		Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up
4.76	9	7.57	13	10.29	17	1	13.12	21	16.14	25	19.36	29
57.42	95	62.55	101	67.19	106	2	71.98	111	76.98	116	82.18	121
93.10	150	99.18	156	104.95	161	3	110.98	167	117.28	172	123.76	178
128.53	202	135.65	208	142.56	214	4	149.79	220	157.27	226	164.72	232
163.81	251	171.97	258	180.00	264	5	188.31	271	196.66	277	204.76	283
198.94	298	208.12	305	217.14	312	6	226.25	319	235.17	325	243.71	331
233.91	343	243.98	351	253.73	357	7	263.33	364	272.63	370	281.41	375
268.61	386	279.32	393	289.50	400	8	299.41	406	308.88	412	317.83	417
302.79	426	313.85	433	324.29	440	9	334.33	445	343.90	451	353.12	456
336.20	464	347.46	471	357.97	477	10	368.06	482	377.84	487	387.25	492
368.71	500	379.97	506	390.49	512	11	400.74	517	410.66	522	420.04	526
400.16	533	411.38	539	422.01	544	12	432.34	549	442.19	554	451.28	558
430.54	564	441.81	570	452.49	575	13	462.71	580	472.23	584	480.81	587
459.98	593	471.24	599	481.77	603	14	491.63	608	500.62	611	508.56	614
488.44	621	499.51	626	509.66	630	15	518.97	634	527.29	636	534.52	639
515.79	646	526.44	651	536.02	654	16	544.65	657	552.25	660	558.78	661
541.83	670	551.88	674	560.77	677	17	568.67	679	575.55	681	581.81	682
566.44	692	575.78	695	583.92	697	18	591.09	699	597.67	701	604.25	703
589.55	712	598.12	714	605.53	716	19	612.37	718	619.21	720	626.42	723
611.15	730	618.96	732	626.02	734	20	633.07	736	640.48	739	648.77	744
N/A	N/A	N/A	N/A	N/A	N/A	Age	N/A	N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A	N/A	N/A	55	N/A	N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A	N/A	N/A	60	N/A	N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A	N/A	N/A	65	N/A	N/A	N/A	N/A	N/A	N/A
Issue Age 75		Issue Age 76		Issue Age 77		End of Year	Issue Age 78		Issue Age 79		Issue Age 80	
Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up		Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up
22.78	34	26.02	38	29.32	42	1	32.65	46	36.01	49	39.40	53
87.52	126	91.54	129	95.12	132	2	98.18	133	100.61	134	102.39	135
130.17	184	135.09	187	139.45	189	3	143.15	191	146.21	192	148.87	192
171.87	238	177.46	241	182.36	243	4	186.59	245	190.41	246	193.82	247
212.44	288	218.47	291	223.81	293	5	228.69	295	233.16	296	237.02	297
251.70	335	258.09	338	263.98	341	6	269.41	342	274.25	344	278.20	344
289.63	380	296.48	383	302.83	385	7	308.55	387	313.40	388	317.14	387
326.38	421	333.61	424	340.17	426	8	345.84	428	350.43	428	353.76	427
361.93	460	369.29	463	375.75	465	9	381.11	465	385.24	465	388.06	464
396.08	496	403.28	499	409.38	500	10	414.26	500	417.85	499	420.17	497
428.62	530	435.43	532	441.00	532	11	445.30	532	448.36	531	450.74	529
459.39	561	465.63	562	470.61	562	12	474.34	561	477.40	560	480.62	559
488.29	589	493.91	590	498.29	590	13	501.96	589	505.77	588	510.32	589
515.35	616	520.34	616	524.61	615	14	528.94	615	533.94	616	540.47	620
540.63	640	545.46	640	550.30	640	15	555.70	642	562.50	645	572.10	652
564.65	662	569.96	663	575.76	665	16	582.80	668	592.41	675	607.44	688
588.06	684	594.23	686	601.51	690	17	611.12	696	625.76	708	650.20	732
611.23	706	618.74	709	628.38	716	18	642.64	727	666.03	750	705.80	790
634.59	727	644.26	734	658.21	745	19	680.61	766	718.27	804	783.92	873
658.88	750	672.54	761	694.06	781	20	729.75	817	791.51	881	902.51	1000
N/A	N/A	N/A	N/A	N/A	N/A	Age	N/A	N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A	N/A	N/A	55	N/A	N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A	N/A	N/A	60	N/A	N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A	N/A	N/A	65	N/A	N/A	N/A	N/A	N/A	N/A

Method of Calculation The Guaranteed Values for Cash Values and Reduced Paid-Up Life Insurance are based on the 2001 Commissioner's Standard Ordinary Combined Ultimate Mortality Tables, age last birthday, assuming death occurs at the end of the Policy Year. All values are calculated using a 4.25% interest rate. The Guaranteed Values for any Policy Year not shown will be provided upon request. The Guaranteed Values under this policy are not less than the minimums required by the state in which this policy is issued. The method of computation of Cash Values and the Nonforfeiture Benefit has been filed with as required or requested by the state in which this policy is delivered.

Reserve Basis The reserves for this policy are calculated using an age last birthday Mortality Table not less than the minimum allowed by the valuation law of the state in which this policy is delivered, and the Commissioners Reserve Valuation Method. The statutory valuation interest rate does not exceed the maximum rate allowed by the valuation law of the state in which this policy is delivered.

POLICY LOANS

Policy Loans While this policy is In Force, You may take out a loan against the Cash Surrender Value for all or part of the Loan Value Available. This policy is used as sole security for the outstanding Policy Loan. The loan amount requested must be at least \$250. We may defer payment of a Policy Loan for up to six months except to pay premiums.

Loan Value Available The Loan Value Available is:

1. the Cash Surrender Value at the end of the current Policy Year; less
2. all unpaid Premium Payments due before the next Policy Anniversary; less
3. any loan interest that will be due on the next Policy Anniversary.

Policy Loan Balance The Policy Loan Balance is:

1. the sum of Policy Loans taken; plus
2. accrued loan interest; minus
3. the sum of Loan Repayments.

Loan Interest Rate Interest accrues daily on the Policy Loan. The maximum Loan Interest Rate is eight percent (8%) per year, compounded annually. Interest is due at the end of each Policy Year or, if earlier, on the date of any Policy Loan increase, Policy Loan repayment, Surrender, or activation of a Nonforfeiture Option. Interest not paid when due is added to the Policy Loan and accrues interest.

We may change the Loan Interest Rate, but it will never exceed the maximum rate. We will notify You of any increase in Loan Interest Rate at least 30 days before the new rate becomes effective.

Loan Repayment You may repay all or part of the Policy Loan Balance at any time while this policy is in force. Any Loan Repayment must be for at least \$25 or the Policy Loan Balance, if less.

Unpaid Loans We will deduct any unpaid Policy Loan Balance from the Cash Surrender Value and Proceeds Payable. Failure to repay a Policy Loan or the loan interest shall not terminate this policy unless the Policy Loan Balance equals or exceeds the Cash Value and not until 31 days after notice is mailed by Us to Your last known address and the last known address of any Assignee.

Automatic Premium Loan Past due Premium Payments for this policy will be paid automatically by Policy Loan if:

1. You made a signed request in the application or before the Grace Period ends; and
2. You have not revoked the Automatic Premium Loan option in writing; and
3. this policy has enough Cash Surrender Value to pay for at least one day's insurance premium.

Premium Payments may be resumed at any time while this policy stays In Force under this provision.

SETTLEMENT PRIVILEGES

Settlement

The proceeds of this policy will be paid as a lump sum deposit to a draft account unless otherwise requested.

In lieu of a single lump sum payment, You or the Beneficiary, as appropriate, may select Settlement under a Settlement Option. Any Settlement Option requires the proceeds to be at least \$2,500 and any periodic payments to be at least \$25. The first installment will be due or interest will begin on the date of death.

When You select a Settlement, the Beneficiary may not assign or receive payments before they are due unless expressly authorized by You.

Payee

The Beneficiary is the Payee under the Settlement Option. A Payee may name a contingent Payee to receive any final amount that would otherwise be paid to the estate of the Payee.

Settlement Options

The Settlement Options for this policy are shown below. The amounts and interest rates shown below are based on the guaranteed minimum settlement option interest rate and guaranteed minimum mortality rates. Our current rates may be higher. Information regarding current rates is available from Our Home Office.

For all Settlement Options: If the Payee dies before We have paid all funds available under the chosen Settlement Option, We will pay any remaining amount to the Payee's properly designated contingent Payee or, if no contingent Payee survives the Payee or none is elected, to the estate of the Payee. Annuity benefits at the time of their commencement will not be less than those that would be provided by the application of the Proceeds to purchase a single consideration immediate annuity contract at purchase rates offered by the company at the time to the same class of annuitants whether the annuity benefits are payable in fixed or variable amounts or both.

Interest Accumulation Settlement Option – Proceeds will earn interest at a rate not less than 2.5% per year compounded annually.

The Payee may withdraw these funds at any time. We will not retain these funds under this option longer than five years. However, if the Payee has not reached the age of majority as established by the law in the state in which the Payee resides, We may retain these funds until the Payee attains the age of majority.

If no contingent Payee exists then we will pay the remaining amount to the Payee's estate.

Interest Income Settlement Option – Each \$1,000 of proceeds will yield an income of not less than \$25 annually, \$12.42 semi-annually, \$6.19 quarterly, or \$2.05 monthly.

Unless the Payee has not reached the age of majority as established by the law in the state in which the Payee resides, the Payee may withdraw the proceeds at any time. After the first year, We may defer such withdrawal for up to six months.

Income for a Specified Period Settlement Option (Income Period Certain) – We will pay installments for a specified period. The amount of each installment per \$1,000 of proceeds will not be less than those shown in the table below.

Number of Installments	Amount of Each Monthly Installment	Number of Installments	Amount of Each Monthly Installment
12	\$84.27	96	\$11.46
24	42.66	108	10.31
36	28.78	120	9.39
48	21.85	180	6.64
60	17.69	240	5.27
72	14.92	300	4.46
84	12.94		

Income of a Specified Amount Settlement Option (Income Amount Certain) –

We will pay installments of a specified amount until the proceeds, together with not less than 2.5% interest compounded annually, are paid in full.

Income for Life With a Guaranteed Minimum Number of Installments

Settlement Option (Income Life) – We will pay installments for the lifetime of the Payee but for not less than a guaranteed number of installments. The amount of each installment will depend upon the adjusted age and gender of the Payee at the time the first payment is due. The adjusted age is determined by calculating the age at the nearest birthday of the Payee on the date of the first payment and subtracting a number that depends on the year in which the first payment begins:

First Payment Due	Adjusted Age is Age Minus
Prior to 2011	1
2011 to 2020	2
2021 to 2030	3
2031 to 2040	4
After 2040	5

AMOUNT OF EACH MONTHLY INSTALLMENT (Per \$1,000 of Proceeds)							
Adjusted Age of Male Payee	Number of Installments Guaranteed			Adjusted Age of Female Payee	Number of Installments Guaranteed		
	60	120	240		60	120	240
0	2.42	2.41	2.41	0	2.37	2.37	2.37
1	2.42	2.42	2.42	1	2.38	2.37	2.37
2	2.43	2.43	2.43	2	2.38	2.38	2.38
3	2.44	2.44	2.44	3	2.39	2.39	2.39
4	2.45	2.45	2.45	4	2.40	2.40	2.40
5	2.46	2.46	2.46	5	2.41	2.41	2.41
6	2.47	2.47	2.47	6	2.42	2.42	2.42
7	2.49	2.48	2.48	7	2.43	2.43	2.43
8	2.50	2.50	2.49	8	2.44	2.44	2.44
9	2.51	2.51	2.51	9	2.45	2.45	2.45
10	2.52	2.52	2.52	10	2.46	2.46	2.46
11	2.54	2.54	2.53	11	2.47	2.47	2.47
12	2.55	2.55	2.55	12	2.49	2.49	2.48
13	2.56	2.56	2.56	13	2.50	2.50	2.50
14	2.58	2.58	2.57	14	2.51	2.51	2.51
15	2.59	2.59	2.59	15	2.53	2.53	2.52
16	2.61	2.61	2.60	16	2.54	2.54	2.54
17	2.63	2.63	2.62	17	2.55	2.55	2.55
18	2.64	2.64	2.64	18	2.57	2.57	2.57
19	2.66	2.66	2.65	19	2.58	2.58	2.58
20	2.68	2.68	2.67	20	2.60	2.60	2.60
21	2.70	2.70	2.69	21	2.62	2.62	2.61
22	2.72	2.72	2.71	22	2.63	2.63	2.63
23	2.74	2.74	2.73	23	2.65	2.65	2.65
24	2.76	2.76	2.75	24	2.67	2.67	2.67
25	2.78	2.78	2.77	25	2.69	2.69	2.68
26	2.80	2.80	2.80	26	2.71	2.71	2.70
27	2.83	2.83	2.82	27	2.73	2.73	2.72
28	2.85	2.85	2.84	28	2.75	2.75	2.75
29	2.88	2.88	2.87	29	2.77	2.77	2.77
30	2.91	2.90	2.89	30	2.80	2.80	2.79
31	2.93	2.93	2.92	31	2.82	2.82	2.81
32	2.96	2.96	2.95	32	2.85	2.84	2.84
33	2.99	2.99	2.98	33	2.87	2.87	2.86
34	3.03	3.02	3.01	34	2.90	2.90	2.89
35	3.06	3.06	3.04	35	2.93	2.93	2.92
36	3.09	3.09	3.07	36	2.96	2.96	2.95
37	3.13	3.13	3.11	37	2.99	2.99	2.98
38	3.17	3.17	3.14	38	3.02	3.02	3.01
39	3.21	3.21	3.18	39	3.05	3.05	3.04
40	3.25	3.25	3.22	40	3.09	3.09	3.07
41	3.3	3.29	3.26	41	3.13	3.12	3.11
42	3.34	3.34	3.30	42	3.17	3.16	3.14
43	3.39	3.38	3.34	43	3.21	3.20	3.18
44	3.44	3.43	3.38	44	3.25	3.24	3.22

Adjusted Age of Male Payee	Number of Installments Guaranteed			Adjusted Age of Female Payee	Number of Installments Guaranteed		
	60	120	240		60	120	240
45	3.50	3.49	3.43	45	3.29	3.29	3.26
46	3.55	3.54	3.48	46	3.34	3.33	3.30
47	3.61	3.59	3.53	47	3.39	3.38	3.35
48	3.67	3.65	3.58	48	3.44	3.43	3.39
49	3.73	3.71	3.63	49	3.50	3.49	3.44
50	3.80	3.78	3.69	50	3.55	3.54	3.49
51	3.87	3.85	3.74	51	3.61	3.60	3.54
52	3.94	3.92	3.80	52	3.67	3.66	3.60
53	4.02	3.99	3.86	53	3.74	3.73	3.65
54	4.10	4.07	3.92	54	3.81	3.79	3.71
55	4.19	4.15	3.98	55	3.88	3.86	3.77
56	4.28	4.24	4.05	56	3.96	3.94	3.83
57	4.37	4.33	4.11	57	4.04	4.02	3.90
58	4.47	4.42	4.18	58	4.13	4.10	3.97
59	4.58	4.52	4.24	59	4.22	4.19	4.03
60	4.70	4.63	4.31	60	4.32	4.28	4.10
61	4.82	4.74	4.38	61	4.42	4.38	4.18
62	4.95	4.85	4.45	62	4.53	4.48	4.25
63	5.09	4.98	4.51	63	4.65	4.59	4.32
64	5.23	5.11	4.58	64	4.77	4.71	4.40
65	5.39	5.24	4.65	65	4.90	4.83	4.47
66	5.55	5.38	4.71	66	5.04	4.96	4.54
67	5.73	5.53	4.77	67	5.20	5.09	4.62
68	5.91	5.68	4.83	68	5.36	5.23	4.69
69	6.11	5.83	4.88	69	5.53	5.38	4.76
70	6.32	6.00	4.93	70	5.71	5.54	4.82
71	6.54	6.16	4.98	71	5.91	5.71	4.88
72	6.77	6.33	5.03	72	6.13	5.88	4.94
73	7.01	6.51	5.06	73	6.35	6.06	4.99
74	7.27	6.68	5.10	74	6.60	6.25	5.04
75	7.54	6.86	5.13	75	6.86	6.45	5.08
76	7.83	7.04	5.16	76	7.14	6.64	5.12
77	8.13	7.22	5.18	77	7.43	6.85	5.15
78	8.44	7.40	5.20	78	7.75	7.05	5.18
79	8.77	7.57	5.22	79	8.09	7.26	5.20
80 and over	9.11	7.74	5.24	80 and over	8.44	7.46	5.22

We have the right to require evidence that the Payee is living on the date of any payment made after the guaranteed number of installments.

Farmers New World Life Insurance Company
Policy Specifications

Prepared on [4/1/2011]

Insured: [JOHN DOE] Face Amount: [\$20,000]
Policy Number: [007002219]
Issue Date: [April 1, 2011] Issue Age: [45] Gender: [Male]
Maturity Date: [April 1, 2066]
Policy Owner:
Policy Co-Owner:
Policy Co-Owner:

Premiums	Annual	Semi-Annual	Quarterly	Monthly	[Special Monthly Mode]
Initial Premium Payment	[\$2,430.95]	[\$1,220.48]	[\$612.74]	[\$204.91]	[\$201.91]

[You have selected to pay by Special Monthly Mode.]

[Policy Fee: Annual: \$140.00, Semi-Annual: \$75.00, Quarterly: \$40.00, Monthly: \$14.00, Monthly BCP (EFT): \$11.00]

POLICY DEATH BENEFIT

The Death Benefit payable will be one of the following, depending on the Policy Year in which the Insured dies ~~and the cause of death~~, unless death is due to suicide in the first two years.

Natural Causes

Accidental
Bodily Injury*

Policy Years 1 and 2	Premiums paid multiplied by 1.1 [\$1,000]	[\$20,000]
<u>Policy Year 2</u>	<u>[\$2,000]</u>	
Policy Years 3 and later	[\$20,000]	[\$20,000]

*The term Accidental Bodily Injury excludes certain causes of death which are defined in the Excluded Accidental Causes section of the policy.

SCHEDULE OF BENEFITS

	Amount	Annual Premium	Premium Payable
Life Insurance	[\$20,000]	[\$2,430.95]	To Attained Age 100
TOTAL PREMIUM		[\$2,430.95]	

THIS POLICY HAS A LIMITED GRADED DEATH BENEFIT –
PLEASE READ YOUR CONTRACT CAREFULLY.

This policy contains a Graded Death Benefit clause which means in order to receive the full benefits that this policy offers You must live two Policy Years beyond the Issue Date of this policy. ~~If death occurs as a result of an Accidental Bodily Injury at any time while the policy is in force, then the Ultimate Face Amount shall be payable. In the first two Policy Years, death from an Excluded Accidental Cause is payable the same as Death from Natural Causes.~~

ENDORSEMENT

Pursuant to Your request to exercise the Reduced Paid-Up Life Insurance Nonforfeiture Option, Your policy will continue as Paid-Up Life Insurance effective _____. The Face Amount of the policy has been reduced to \$_____. Premium Payments are no longer required or allowed.

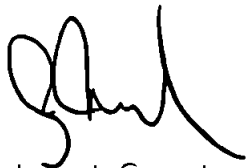
Table of Reduced Paid-Up Cash Values

The Reduced Paid-Up Cash Values are based on the Insured's Attained Age and are for each \$1,000 of Reduced Paid-Up Life Insurance.

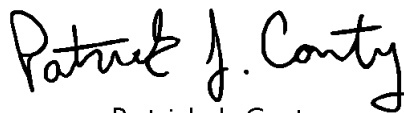
GUARANTEED REDUCED PAID-UP CASH VALUES <u>AT BEGINNING OF POLICY YEAR</u>									
Attained Age	Cash Value	Attained Age	Cash Value	Attained Age	Cash Value	Attained Age	Cash Value	Attained Age	Cash Value
21	N/A	42	N/A	63	481.484 <u>95.26</u>	84	776.797 <u>87.77</u>	105	1,000.00920 <u>.04</u>
22	N/A	43	N/A	64	495.405 <u>09.21</u>	85	788.617 <u>99.01</u>	106	1,000.00923 <u>.31</u>
23	N/A	44	N/A	65	509.355 <u>23.20</u>	86	799.998 <u>09.68</u>	107	1,000.00926 <u>.48</u>
24	N/A	45	267.322 <u>76.80</u>	66	523.355 <u>37.27</u>	87	810.858 <u>19.72</u>	108	1,000.00929 <u>.57</u>
25	N/A	46	276.862 <u>86.59</u>	67	537.435 <u>51.46</u>	88	821.138 <u>29.10</u>	109	1,000.00932 <u>.57</u>
26	N/A	47	286.652 <u>96.64</u>	68	551.635 <u>65.80</u>	89	830.838 <u>37.79</u>	110	1,000.00935 <u>.47</u>
27	N/A	48	296.703 <u>07.00</u>	69	565.985 <u>80.30</u>	90	839.948 <u>45.78</u>	111	1,000.00938 <u>.28</u>
28	N/A	49	307.063 <u>17.71</u>	70	580.505 <u>94.96</u>	91	848.528 <u>53.21</u>	112	1,000.00941 <u>.00</u>
29	N/A	50	317.783 <u>28.77</u>	71	595.176 <u>09.74</u>	92	856.768 <u>60.22</u>	113	1,000.00943 <u>.61</u>
30	N/A	51	328.843 <u>40.16</u>	72	609.966 <u>24.50</u>	93	864.908 <u>66.83</u>	114	1,000.00946 <u>.14</u>
31	N/A	52	340.243 <u>51.86</u>	73	624.746 <u>39.15</u>	94	873.120 <u>1</u>	115	1,000.00948 <u>.57</u>
32	N/A	53	351.943 <u>63.82</u>	74	639.416 <u>53.74</u>	95	881.658 <u>78.71</u>	116	1,000.00950 <u>.90</u>
33	N/A	54	363.903 <u>76.03</u>	75	654.026 <u>68.27</u>	96	890.878 <u>84.04</u>	117	1,000.00953 <u>.14</u>
34	N/A	55	376.123 <u>88.45</u>	76	668.576 <u>82.72</u>	97	901.558 <u>89.14</u>	118	1,000.00955 <u>.29</u>
35	N/A	56	388.544 <u>01.05</u>	77	683.066 <u>97.07</u>	98	914.968 <u>93.97</u>	119	1,000.00957 <u>.34</u>
36	N/A	57	401.154 <u>13.84</u>	78	697.437 <u>11.19</u>	99	933.038 <u>98.47</u>	120	1,000.00959 <u>.23</u>
37	N/A	58	413.944 <u>26.88</u>	79	711.597 <u>24.99</u>	100	959.239 <u>02.50</u>	121	1,000.00
38	N/A	59	426.984 <u>40.19</u>	80	725.447 <u>38.42</u>	101	1,000.00 <u>906.15</u>		
39	N/A	60	440.304 <u>53.75</u>	81	738.917 <u>51.40</u>	102	1,000.00 <u>909.74</u>		
40	N/A	61	453.874 <u>67.50</u>	82	751.967 <u>63.93</u>	103	1,000.00 <u>913.26</u>		
41	N/A	62	467.624 <u>81.35</u>	83	764.567 <u>76.06</u>	104	1,000.00 <u>916.69</u>		

Attached to and made a part of this policy, effective as of the effective date of the change to
Reduced Paid-Up Life Insurance.

FARMERS NEW WORLD LIFE INSURANCE COMPANY



Jerry J. Carnahan
President



Patrick J. Carty
Secretary

<i>SERFF Tracking Number:</i>	<i>FNWW-127093975</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Farmers New World Life Insurance Company</i>	<i>State Tracking Number:</i>	<i>48392</i>
<i>Company Tracking Number:</i>	<i>FGDB WHOLE LIFE</i>		
<i>TOI:</i>	<i>L071 Individual Life - Whole</i>	<i>Sub-TOI:</i>	<i>L071.211 Early Duration Reduced Benefit - Single Premium - Any Policy Design</i>
<i>Product Name:</i>	<i>Graded Death Benefit Whole Life</i>		
<i>Project Name/Number:</i>	<i>FGDB Whole Life/</i>		

Superseded Schedule Items

Please note that all items on the following pages are items, which have been replaced by a newer version. The newest version is located with the appropriate schedule on previous pages. These items are in date order with most recent first.

Creation Date:	Schedule	Schedule Item Name	Replacement Creation Date	Attached Document(s)
04/01/2011	Form	Reduced Paid-Up Endorsement	05/27/2011	2011 RPU END.pdf (Superseded)
04/01/2011	Form	Farmers Graded Death Benefit Whole Life	05/03/2011	2011-123.pdf (Superseded)

ENDORSEMENT

Pursuant to Your request to exercise the Reduced Paid-Up Life Insurance Nonforfeiture Option, Your policy will continue as Paid-Up Life Insurance effective _____. The Face Amount of the policy has been reduced to \$ _____. Premium Payments are no longer required or allowed.

Table of Reduced Paid-Up Cash Values

The Reduced Paid-Up Cash Values are based on the Insured's Attained Age and are for each \$1,000 of Reduced Paid-Up Life Insurance.

GUARANTEED REDUCED PAID-UP CASH VALUES									
Attained Age	Cash Value	Attained Age	Cash Value	Attained Age	Cash Value	Attained Age	Cash Value	Attained Age	Cash Value
21	N/A	42	N/A	63	481.48	84	776.79	105	1,000.00
22	N/A	43	N/A	64	495.40	85	788.61	106	1,000.00
23	N/A	44	N/A	65	509.35	86	799.99	107	1,000.00
24	N/A	45	267.32	66	523.35	87	810.85	108	1,000.00
25	N/A	46	276.86	67	537.43	88	821.13	109	1,000.00
26	N/A	47	286.65	68	551.63	89	830.83	110	1,000.00
27	N/A	48	296.70	69	565.98	90	839.94	111	1,000.00
28	N/A	49	307.06	70	580.50	91	848.52	112	1,000.00
29	N/A	50	317.78	71	595.17	92	856.76	113	1,000.00
30	N/A	51	328.84	72	609.96	93	864.90	114	1,000.00
31	N/A	52	340.24	73	624.74	94	873.12	115	1,000.00
32	N/A	53	351.94	74	639.41	95	881.65	116	1,000.00
33	N/A	54	363.90	75	654.02	96	890.87	117	1,000.00
34	N/A	55	376.12	76	668.57	97	901.55	118	1,000.00
35	N/A	56	388.54	77	683.06	98	914.96	119	1,000.00
36	N/A	57	401.15	78	697.43	99	933.03	120	1,000.00
37	N/A	58	413.94	79	711.59	100	959.23	121	1,000.00
38	N/A	59	426.98	80	725.44	101	1,000.00		
39	N/A	60	440.30	81	738.91	102	1,000.00		
40	N/A	61	453.87	82	751.96	103	1,000.00		
41	N/A	62	467.62	83	764.56	104	1,000.00		

Attached to and made a part of this policy, effective as of the effective date of the change to
Reduced Paid-Up Life Insurance.

FARMERS NEW WORLD LIFE INSURANCE COMPANY


Thomas J. White
President


Brian F. Kreger
Secretary



FARMERS
LIFE INSURANCE

Farmers New World Life Insurance Company

[Home Office: 3003 77th Ave. S.E., Mercer Island, Washington 98040 / (206)232-8400
Columbus Life Office: 2500 Farmers Drive, Columbus, Ohio 43235 / (614) 764-9975]

A STOCK COMPANY

Insured [JOHN DOE]

[007002209] Policy Number

In the Entire Policy Contract, references to the Policy Owner will be stated as "You" and "Your" and references to Farmers New World Life Insurance Company will be stated as "Us," "We," and "Our."

In consideration of the application and payment of premiums, We insure the person named above as the Insured in accordance with the provisions of this policy and We will pay the Proceeds Payable in the manner provided in the section titled Payment of Proceeds.

This policy's Face Amount, the amount and frequency of the Premium Payment, and other policy data are shown on the Policy Specifications page.

THIS POLICY HAS A LIMITED GRADED DEATH BENEFIT – PLEASE READ YOUR CONTRACT CAREFULLY.

This policy contains a Graded Death Benefit clause which means in order to receive the full benefits that this policy offers You must live two Policy Years beyond the Issue Date of this policy. If death occurs as a result of an Accidental Bodily Injury at any time while this policy is in force, then the Ultimate Face Amount shall be payable. In the first two Policy Years, death from an Excluded Accidental Cause is payable the same as Death from Natural Causes.

NOTICE OF YOUR RIGHT TO RETURN THIS POLICY

RIGHT TO EXAMINE PERIOD: This policy may, at any time within [30] days after its receipt by You, be returned for cancellation by delivering it or mailing it along with a signed request for cancellation to an agent of the company, to Our branch office, or to Our Home Office at the address listed above. Such delivery or mailing of this policy and signed request for cancellation shall void this policy from the beginning and the parties shall be in the same position as if no policy had been issued. We will refund all premiums paid, including any fees or charges.

Thomas J. White
President

Brian Kreger
Secretary

Farmers New World Life Insurance Company

**THIS POLICY IS A LEGAL CONTRACT BETWEEN YOU AND US.
READ YOUR POLICY CAREFULLY.**

ALPHABETIC GUIDE TO YOUR POLICY

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DEFINITIONS

This section provides definitions for capitalized terms not defined or explained elsewhere in the Entire Policy Contract.

Assignment	An agreement under which You transfer some or all of Your ownership rights to another party, who is called the Assignee.
Attained Age	The sum of the Issue Age plus the number of Policy Years completed since the Issue Date.
Evidence of Insurability	Information concerning any person to be Insured under this policy, which We deem sufficient to approve an application for this policy or changes to this policy or a Reinstatement of this policy.
Face Amount	An amount chosen by You that is used to calculate premiums and determine the Proceeds Payable. The actual Proceeds Payable paid upon death may be more or less than the Face Amount.
In Force	In effect. An insurance policy that is In Force will provide all rights and benefits available thereunder. If this policy is not In Force there will be no rights or benefits.
Insured	The natural person whose life is covered under this policy.
Issue Age	The Insured's age as of his/her last birthday on this policy's Issue Date.
Issue Date	The effective date for the insurance coverage under this policy, provided the first Premium Payment has been made and all policy issue requirements have been received by Us. Policy Months, Years, and Anniversaries are measured from the Issue Date, which is shown on the Policy Specifications page.
Lapse	The termination of this policy due to nonpayment of sufficient Premium Payments or loan repayments. A policy that has Lapsed provides no further benefit.
Maturity Date	The Maturity Date of this policy is the Policy Anniversary when the Insured's Attained Age is 121.
Monthly Policy Date	The same day each month as the Issue Date for each succeeding month.
Natural Causes	<p>Any cause of death that is not:</p> <ol style="list-style-type: none">1. a suicide, or2. an accident, unless it is an Excluded Accidental Cause. <p>Excluded Accidental Causes shall be considered Natural Causes.</p>
Policy Anniversary	The same day and month as the Issue Date for each succeeding year this policy remains In Force.
Policy Month	The period from one Monthly Policy Date (or from the Issue Date) to the next Monthly Policy Date.
Policy Year	The period from one Policy Anniversary (or from the Issue Date) to the next Policy Anniversary.
Premium Due Date	The day of each month on which Your Premium Payment becomes due. The Premium Due Date is the same day of the month as the Issue Date.

GENERAL PROVISIONS

Entire Policy Contract	<p>The Entire Policy Contract is:</p> <ol style="list-style-type: none">1. this policy;2. any attached applications;3. any attached amendments and supplements to the applications;4. any attached endorsements;5. any attached Reinstatement applications;6. any attached application for changes;7. any revised Policy Specifications page issued by Us; and8. any document We send You with instructions to attach it to Your policy.
Change of Contract	<p>Any change in the terms of the Entire Policy Contract must be in writing and signed by one of Our officers. A change can be in the form of an endorsement, or an amendment or supplement to an application. A copy of the change will be attached to this policy or will be sent to You to attach to Your policy. No insurance producer has the authority to change any terms or conditions of the Entire Policy Contract.</p>
Incontestability	<p>We rely on the statements made in any applications for this policy. We also rely on statements made in any amendments and supplements to applications. In the absence of fraud, statements made in any applications or in any amendments or supplements to applications are deemed representations and not warranties.</p> <p>In addition to any other reasons permitted by law, We can contest the validity of this policy, or any Reinstatement of this policy, if:</p> <ol style="list-style-type: none">1. any material misrepresentation of fact is made in any applications or any amendments or supplements to applications; and2. a copy of the applications or amendments or supplements to applications is attached to this policy when issued or later made a part of this policy after the Issue Date. <p>Except for Reinstatements, We will not contest this policy after it has been In Force during the lifetime of the Insured for two years after the Issue Date. If this policy is Reinstated, We will not contest this policy based upon any statements on the Reinstatement application after it has been In Force during the lifetime of the Insured for two years after the effective date of Reinstatement.</p>
Suicide	<p>If, within two years after the Issue Date, the Insured dies by suicide, while sane or insane, We will limit the Proceeds Payable to the Premium Payments made minus any Policy Loans taken.</p>
Misstatement of Age or Gender	<p>If the Insured's age or gender was misstated, We will adjust the Proceeds Payable. The adjusted Proceeds Payable will be that which the most recent Premium Payments made would have purchased at the correct age or gender.</p> <p>Proof of age or gender may be filed with Us at any time. Once the Insured's age or gender is established to Our satisfaction, We will use this age or gender in any settlement.</p>
Internal Revenue Code	<p>This policy is intended to qualify as life insurance under the Internal Revenue Code. Accordingly, the provisions of this policy are to be interpreted and will be administered by Us to ensure such tax qualification.</p>
Conformity to State Laws	<p>This policy is subject to the laws of the state in which it is issued. Any terms which are in conflict with these laws are amended to conform.</p>
Nonparticipating	<p>This policy is Nonparticipating. It does not share in Our surplus earnings.</p>
Claims of Creditors	<p>To the extent allowed by law, no benefits of this policy will be subject to any claim of legal process by any creditor.</p>

OWNERSHIP

Policy Owner	The Policy Owner of this policy is the Insured unless: <ol style="list-style-type: none">1. another natural person or entity has been named as Policy Owner in the application; or2. a new Policy Owner is named in accordance with the Change of Policy Owner section.
Rights of Policy Owner	During the lifetime of the Insured, the Policy Owner may exercise all rights and privileges provided in this policy.
Policy Co-Owner	More than one natural person or entity may be named as the Policy Owner in accordance with the Change of Policy Owner section. Such natural persons or entities shall serve as Policy Co-Owners and shall act jointly to exercise all the rights of the Policy Owner. If a Policy Co-Owner dies during the Insured's lifetime and no Successor Owner for the deceased Policy Co-Owner has been named, the remaining Policy Co-Owner(s) shall become the Policy Owner(s).
Successor Owner	During the Insured's lifetime, the Policy Owner may name a Successor Owner to become the Policy Owner upon the Policy Owner's death. If no Successor Owner is named or the Successor Owner and Policy Owner both die before the Insured and no other Change of Policy Owner has been made, then the Insured will become the Policy Owner, unless the Insured has not reached the age of majority as established by the laws in the state in which the Insured resides, in which case the Beneficiary, in order from primary to contingent, if any is living, will become the Policy Owner(s).
Change of Policy Owner	The Policy Owner may name a new Policy Owner, add a Policy Owner to establish Policy Co-Owners, or name a Successor Owner by notifying Us in writing while the Insured is alive, subject to any existing Assignment. When We receive acceptable signed notice, the change will take effect on the date the notice was signed. The change is subject to any action We may have taken before receiving the notice.
Assignment	The Policy Owner may assign this policy. We are not bound by an Assignment unless the Assignment forms executed by the Policy Owner are recorded by Us. The Assignment shall take effect on the date the notice of Assignment is signed by the Policy Owner, subject to any payments made, or actions taken by the company prior to receipt of the notice. We are not responsible for the validity of an Assignment.

BENEFICIARY

Beneficiary Designation	The Beneficiary is the natural person(s) or the entity(ies) named to receive the Proceeds Payable at the Insured's death. The Beneficiary is as named in the application or as changed by Your signed request while the Insured is living.
Change of Beneficiary	You may change the Beneficiary at any time before the Insured dies, subject to the rights of any Assignee or Irrevocable Beneficiary. You must sign any change request and it must be recorded by Us to be effective. The change request must be signed before the Insured's death but may be recorded by Us after the Insured's death. The change will take effect on the date it was signed, subject to any payment We make or any action taken by Us before We receive the request.
Delay Clause	This is an optional clause. If requested, this clause provides that, if the Beneficiary dies within a specified number of days following the Insured's death (not including the date of death), the Proceeds Payable will be paid as if the Beneficiary died before the Insured. The specified number of days cannot exceed 180. You may request a Delay Clause in the application or in any acceptable signed request recorded by Us while the Insured is living. If a Delay Clause is requested and a number of days is not specified, the default is 15 days.

DEATH BENEFIT

Death Benefit	The Death Benefit payable depends on the cause of death and the Policy Year in which the Insured dies.
Graded Death Benefit	A Death Benefit that is limited to the portion of premiums actually paid, that were due through the end of the Policy Month of the Insured's death, multiplied by 1.1.
Ultimate Face Amount	The Face Amount of the Policy.
Policy Years 1 & 2	<p>Death from Accidental Bodily Injury</p> <p>If the Insured dies from Accidental Bodily Injury in any Policy Year, the Death Benefit is the Policy's Ultimate Face Amount.</p> <p>The Accidental Bodily Injury must:</p> <ol style="list-style-type: none">1. be the direct result of an accident that occurs while this policy is In Force; and2. result in death, within 180 days, independent of disease or bodily or mental illness or infirmity or any other cause (except for sickness caused by accidental bodily injury); and3. not be an Excluded Accidental Cause. <p>Death from Natural Causes</p> <p>If the Insured dies from Natural Causes in the first or second Policy Year, the Death Benefit is the Graded Death Benefit.</p> <p>Reduced Death Benefits during the first two Policy Years are only applicable to death from Natural Causes.</p>
Policy Year 3 or Later	<p>Death from any Cause</p> <p>In the third Policy Year or later, the Death Benefit for any cause of death is the Ultimate Face Amount.</p>
Excluded Accidental Causes	<p>Exclusions during the first two Policy Years that do not qualify for the Ultimate Face Amount:</p> <ol style="list-style-type: none">1. death caused or contributed to by disease or infirmity of mind or body, or medical or surgical treatment for such disease or infirmity;2. an infection not occurring as a direct result or consequence of the Accidental Bodily Injury;3. death caused or contributed to by travel in or descent from an aircraft, if the Insured acted in a capacity other than as a passenger;4. death caused or contributed to by travel in an aircraft or device used for testing or experimental purposes, or used by or for any military authority, or used for travel beyond the earth's atmosphere;5. death caused or contributed to by war or act of war.6. death caused or contributed to by active participation in a riot, insurrection or terrorist activity;7. death occurring while the Insured is incarcerated;8. death caused or contributed to by committing or attempting to commit a felony;9. death caused or materially contributed to by voluntary intake or use by any means of:<ol style="list-style-type: none">a) any drug, unless prescribed or administered by a physician and taken in accordance with the physician's instructions, or;b) poison, gas or fumes, unless a direct result of an occupational accident;10. death caused or contributed to by intoxication as defined by the jurisdiction where the accident occurred;11. death caused or contributed to by riding or driving an air, land or water vehicle in a race, speed or endurance contest;12. death caused or contributed to by bungee jumping;13. Death caused or materially contributed to by participation in an illegal occupation or activity;14. death caused or contributed to by rock or mountain climbing; and/or15. death caused or contributed to by aeronautics (hang-gliding, skydiving, parachuting, ultralight, soaring, ballooning and parasailing).

PAYMENT OF PROCEEDS

Proceeds

If the Insured dies while this policy is In Force, We will pay the Proceeds Payable within 30 days after Our receipt of satisfactory proof of death, to the Beneficiary as described below, subject to Our rights to investigate any claim under this policy, and subject to the Incontestability provision or any Assignment of this policy:

1. to any primary Beneficiary;
2. if no primary Beneficiary survives the Insured, We will pay the Proceeds Payable to any contingent Beneficiary who survives the Insured. Unless otherwise specified, the interest of any Beneficiary who dies before the Insured will pass to any Beneficiary in the same class (that is primary or contingent) who survives the Insured; and
3. if no Beneficiary survives the Insured, We will pay the Proceeds Payable to the Policy Owner or the Policy Owner's estate.

Payment will be made as a lump sum deposit to a draft account unless otherwise requested in writing signed by the Beneficiary.

Proceeds Payable

The Proceeds Payable are:

1. the Death Benefit; plus
2. any part of Premium Payments made beyond the Policy Month of the Insured's death; less
3. any Policy Loans and accrued loan interest; less
4. any Premium Payments due and unpaid at the date of death; less
5. any Surrender proceeds previously paid.

Interest on the Proceeds Payable

We shall pay interest on the Proceeds Payable from the date of death to the date of payment. The interest shall be the current rate of interest on proceeds left on deposit, plus additional interest at a rate of 10% annually, until the date the claim is paid, beginning 30 calendar days from the latest of:

1. the date We receive satisfactory proof of death;
2. the date We receive sufficient information to determine our liability, the extent of the liability, and the appropriate payee legally entitled to the Proceeds Payable; and
3. the date that legal impediments to payment of proceeds that depend on the action of parties other than Us are resolved and sufficient evidence of the same is provided to Us. Legal impediments to payment include, but are not limited to:
 - a) the establishment of guardianships and conservatorship;
 - b) the appointment and qualification of trustees, executors and administrators; and
 - c) the submission of information required to satisfy state and federal reporting requirements.

Duty to Cooperate

You and any Beneficiary or other claimant shall at all times fully cooperate with Us in Our review and investigation of any claim for benefits under this policy, and You and any Beneficiary or claimant shall provide Us with any information and assistance We may reasonably request to enable Us to pay any Proceeds Payable in a timely manner.

We reserve the right, at Our expense, to require an autopsy unless prohibited by law.

PREMIUMS AND REINSTATEMENTS

Premium Payments

The first Premium Payment is due on the Policy Issue Date and must be paid before coverage begins. Subsequent premiums are payable in advance of the period they are to cover to Us at Our Home Office or to one of Our authorized agents. Premium Payments are not required or allowed at or beyond the Insured's Attained Age 100. Your premiums are payable in U.S. currency. We will provide a receipt upon request.

Other than the first initial premium payment, all subsequent premiums will be payable by Monthly Electronic Funds Transfer.

Grace Period

We allow a grace period of 31 days following the Premium Due Date of each Premium Payment. This policy will remain In Force during the Grace Period. If the Premium Payment due is not paid by the end of the 31-day Grace Period, this Entire Policy Contract will Lapse except as provided in the Nonforfeiture Option Section.

If the Insured dies during the Grace Period, the Proceeds Payable will reflect any overdue Premium Payments.

Reinstatement

This policy may be Reinstated within three years of entering a Grace Period that ends with a subsequent Lapse in coverage or within three years of exercising the Reduced Paid-Up Life Insurance Nonforfeiture Option. Reinstatement is not allowed if this policy has been Surrendered.

We will Reinstatement any Policy Loan Balance outstanding on the date of Lapse or on the date the Reduced Paid-Up Life Insurance Nonforfeiture Option was exercised.

To Reinstatement this policy, You must:

1. provide Evidence of Insurability sufficient to demonstrate that there has been no material change in the health of the Insured covered under this policy since the Issue Date;
2. pay past due Premium Payments plus interest at a rate specified by us, not to exceed 6% per year compounded annually;
3. pay accrued loan interest from the date of Lapse or the date the Reduced Paid-Up Life Insurance Nonforfeiture Option was exercised to the next Policy Anniversary; and
4. complete the appropriate company authorization to pay all future premiums by Monthly Electronic Funds Transfer.

The effective date of the Reinstatement will be the date the Reinstatement application is approved by Us, provided that all above requirements have been satisfied and provided the Insured is living on that date. The Incontestability provision of this contract is effective for two years from the effective date of Reinstatement.

Automatic Reinstatement

We will automatically Reinstatement this policy within 20 days after the end of the Grace Period if We receive all past due Premium Payments while the Insured is living.

CASH VALUE AND CASH SURRENDER VALUE

Cash Value	If You have not exercised the Nonforfeiture Option, the Cash Value of this policy is the Cash Value shown in the Table of Guaranteed Values, adjusted to reflect premiums due and paid since the most recent Policy Anniversary.
Cash Surrender Value	The Cash Surrender Value is: <ol style="list-style-type: none">1. the Cash Value; less2. any outstanding Policy Loans and accrued loan interest; plus3. any Premium Payments we have received that have not become due.
Cash Surrender	On any date that this policy has a Cash Surrender Value, as defined in the Cash Surrender Value section, You may Surrender this policy for the Cash Surrender Value after We receive Your signed request together with this policy. If this policy is surrendered within 30 days following a Policy Anniversary the value available shall not be less than the anniversary value. We have the right to defer payment for up to six months or the period allowed by law, if less. If You Surrender this policy prior to the Insured's Attained Age 100 and this policy is not within a Grace Period, this policy will terminate the first Monthly Policy Date on or after the Surrender. If You Surrender this policy during a Grace Period or at the Insured's Attained Ages 100 through 120, this policy will terminate on the date of the Surrender.
Maturity	If this policy is In Force on the Maturity Date, the Cash Surrender Value will be sent to the Policy Owner, this policy will terminate, and all coverage under the Entire Policy Contract will end.

NONFORFEITURE OPTION

If You stop making Premium Payments after Your policy has a Cash Value, You may exercise the Nonforfeiture Option subject to the terms below.

Reduced Paid-Up Life Insurance	<p>This policy may continue as Paid-Up Life Insurance for a reduced Face Amount. On the date this option is exercised, the Cash Surrender Value will be used as a net single premium at the Insured's Attained Age to determine the Face Amount of the Reduced Paid-Up Life Insurance. Since any Policy Loan outstanding on the date this option is exercised, together with accrued interest, will be deducted in calculating the Reduced Paid-Up Life Insurance, the Policy Loan outstanding on the option exercise date will be considered as fully repaid and will not be deducted again from any Proceeds Payable. New Policy Loans taken after the option is exercised will be deducted from any Proceeds Payable.</p> <p>Reduced Paid-Up Life Insurance will have its own Cash Surrender and Policy Loan privileges. If the Reduced Paid Up Life Insurance is Surrendered, this policy will terminate on the date of the Surrender.</p>
Activation of Option	You may exercise the Nonforfeiture Option no later than 60 days after the premium due date, by sending Us a signed request. However, the Reduced Paid-Up Life Insurance Nonforfeiture Option can only be exercised before the Insured reaches Attained Age 100. At the end of a Grace Period, if Your policy has a Cash Surrender Value and the Automatic Premium Loan provision is not in effect, We will automatically exercise the Nonforfeiture Option.

GUARANTEED VALUES

The Guaranteed Values for this policy are determined by the Issue Age and gender of the Insured, and by the number of Policy Years that Premium Payments have been made. These values assume Premium Payments are made to the end of the Policy Year and that no Policy Loan exists on this policy. The Cash Values and amounts of Reduced Paid-Up Life Insurance are for each \$1,000 of Face Amount.

TABLE OF GUARANTEED VALUES

Issue Age 45		Issue Age 46		Issue Age 47		End of Year	Issue Age 48		Issue Age 49		Issue Age 50	
Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up		Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up
0.00	0	0.00	0	0.00	0	1	0.00	0	0.00	0	0.00	0
5.73	20	6.40	21	7.13	23	2	7.91	25	8.73	26	9.58	28
20.37	67	21.77	69	23.23	71	3	24.75	73	26.30	75	27.87	77
35.52	112	37.63	115	39.81	118	4	42.04	120	44.28	122	46.53	124
51.16	156	53.96	159	56.83	162	5	59.72	165	62.62	167	65.51	169
67.26	198	70.73	202	74.24	205	6	77.78	207	81.28	210	84.77	212
83.80	239	87.89	242	92.02	245	7	96.13	248	100.22	250	104.32	253
100.71	277	105.40	281	110.09	284	8	114.76	287	119.44	289	124.24	292
117.98	314	123.21	318	128.43	321	9	133.67	323	139.02	326	144.58	329
135.53	349	141.28	353	147.05	356	10	152.93	359	159.02	362	165.31	365
153.35	383	159.62	386	166.01	389	11	172.61	393	179.40	396	186.32	399
171.43	415	178.31	418	185.39	422	12	192.66	425	200.05	428	207.50	432
189.86	445	197.40	449	205.13	453	13	212.98	456	220.88	459	228.76	462
208.68	475	216.84	478	225.14	482	14	233.47	486	241.77	489	250.08	492
227.85	503	236.56	507	245.31	510	15	254.03	513	262.73	516	271.47	519
247.29	529	256.43	533	265.55	537	16	274.65	540	283.76	543	292.97	546
266.88	555	276.37	559	285.85	562	17	295.33	565	304.90	568	314.66	571
286.54	579	296.37	583	306.22	586	18	316.13	589	326.23	592	336.58	595
306.26	602	316.44	605	326.69	609	19	337.12	612	347.77	615	358.75	619
326.05	624	336.62	627	347.35	630	20	358.31	634	369.57	637	381.16	641
Age						55	96.13	248	81.28	210	65.51	169
135.53	349	123.21	318	110.09	284	60	192.66	425	179.40	396	165.31	365
227.85	503	216.84	478	205.13	453	65	295.33	565	283.76	543	271.47	519
326.05	624	316.44	605	306.22	586							
Issue Age 51		Issue Age 52		Issue Age 53		End of Year	Issue Age 54		Issue Age 55		Issue Age 56	
Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up		Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up
0.00	0	0.00	0	0.00	0	1	0.00	0	0.00	0	0.00	0
10.46	29	11.38	31	12.32	32	2	13.31	34	14.34	35	15.46	37
29.46	79	31.05	80	32.68	82	3	34.38	84	36.26	85	38.33	88
48.78	126	51.03	128	53.34	129	4	55.86	131	58.65	134	61.63	136
68.38	171	71.29	173	74.40	175	5	77.79	177	81.46	180	85.25	183
88.28	214	91.95	216	95.90	218	6	100.14	221	104.58	224	109.07	227
108.56	255	113.04	257	117.81	260	7	122.79	263	127.89	266	132.96	269
129.27	294	134.54	297	140.02	300	8	145.62	303	151.28	306	156.93	309
150.37	332	156.32	335	162.40	338	9	168.54	341	174.74	344	180.98	346
171.75	368	178.28	371	184.87	374	10	191.52	377	198.28	379	205.16	382
193.31	402	200.32	405	207.40	408	11	214.58	411	221.95	414	229.54	417
214.95	435	222.43	437	230.01	440	12	237.77	443	245.82	446	254.18	450
236.65	465	244.61	468	252.74	471	13	261.16	474	269.94	478	279.11	481
258.42	494	266.90	497	275.66	500	14	284.78	504	294.34	508	304.31	512
280.31	522	289.40	525	298.83	529	15	308.68	532	319.00	537	329.70	541
302.39	549	312.12	552	322.26	556	16	332.85	560	343.86	564	355.06	569
324.70	574	335.11	578	345.95	582	17	357.20	586	368.69	591	380.26	595
347.27	599	358.35	603	369.82	607	18	381.52	611	393.35	616	405.33	621
370.08	623	381.76	627	393.66	631	19	405.68	635	417.89	640	430.31	644
393.07	645	405.16	649	417.35	653	20	429.73	658	442.34	662	455.17	667
Age						55	0.00	0	N/A	N/A	N/A	N/A
48.78	126	31.05	80	12.32	32	60	100.14	221	81.46	180	61.63	136
150.37	332	134.54	297	117.81	260	65	214.58	411	198.28	379	180.98	346
258.42	494	244.61	468	230.01	440							
Issue Age 57		Issue Age 58		Issue Age 59		End of Year	Issue Age 60		Issue Age 61		Issue Age 62	
Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up		Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up
0.00	0	0.00	0	0.00	0	1	0.00	0	0.00	0	0.00	0
16.67	38	17.96	40	19.29	42	2	20.79	44	24.13	49	27.61	55
40.50	90	42.68	92	44.83	94	3	47.06	96	51.11	101	55.35	106
64.65	139	67.60	141	70.45	143	4	73.40	145	78.18	150	83.24	155
89.00	185	92.61	187	96.14	189	5	99.83	191	105.39	197	111.37	202
113.44	230	117.69	232	121.92	234	6	126.41	236	132.84	241	139.79	248
137.94	271	142.86	274	147.85	276	7	153.21	278	160.57	284	168.54	291
162.53	311	168.16	313	173.99	316	8	180.29	319	188.63	326	197.61	333
187.25	349	193.69	352	200.41	355	9	207.69	358	217.00	365	226.90	373
212.19	385	219.47	388	227.13	392	10	235.39	396	245.58	403	256.16	411
237.39	420	245.56	424	254.15	428	11	263.29	432	274.13	439	285.22	447
262.87	453	271.93	458	281.37	462	12	291.18	467	302.48	474	314.14	481
288.64	486	298.50	490	308.57	495	13	318.87	499	330.71	506	342.96	514
314.60	516	325.05	521	335.58	526	14	346.43	530	358.83	537	371.63	545
340.54	546	351.42	550	362.47	555	15	373.89	560	386.81	567	400.08	574
366.30	574	377.66	578	389.25	583	16	401.21	588	414.57	595	428.11	602
391.94	600	403.80	605	415.90	610	17	428.32	615	441.92	622	455.50	629
417.48	625	429.82	630	442.34	635	18	455.02	640	468.65	647	482.15	653
442.90	649	455.63	654	468.39	659	19	481.13	664	494.66	670	507.94	676
468.12	672	481.06	677	493.85	682	20	506.52	686	519.82	692	532.84	698
Age						55	N/A	N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A	N/A	N/A	60	N/A	N/A	N/A	N/A	N/A	N/A
40.50	90	17.96	40	0.00	0	65	99.83	191	78.18	150	55.35	106
162.53	311	142.86	274	121.92	234							

Issue Age 63		Issue Age 64		Issue Age 65		End of Year	Issue Age 66		Issue Age 67		Issue Age 68	
Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up		Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up
0.00	0	0.00	0	0.00	0	1	0.00	0	0.00	0	2.11	4
31.26	60	35.11	66	39.22	72	2	43.35	77	47.75	83	52.45	89
59.86	112	64.72	118	69.95	124	3	75.32	130	81.05	137	87.04	143
88.71	161	94.63	168	101.03	175	4	107.65	181	114.59	188	121.60	195
117.85	209	124.89	216	132.46	223	5	140.23	230	148.11	238	155.92	244
147.34	254	155.49	262	164.13	270	6	172.77	277	181.39	284	190.09	291
177.15	298	186.31	306	195.77	314	7	205.09	321	214.53	329	224.12	336
207.18	340	217.11	348	227.19	356	8	237.26	363	247.53	371	257.99	378
237.19	380	247.70	388	258.47	396	9	269.31	403	280.38	411	291.59	419
266.99	418	278.15	426	289.62	434	10	301.20	442	312.97	449	324.70	457
296.66	454	308.47	462	320.63	470	11	332.85	478	345.07	486	357.06	493
326.20	489	338.66	497	351.39	505	12	364.02	512	376.45	520	388.54	527
355.61	521	368.60	529	381.70	537	13	394.49	545	406.98	552	419.00	558
384.79	553	398.10	560	411.32	568	14	424.14	575	436.52	581	448.42	587
413.53	582	426.94	589	440.14	597	15	452.82	603	465.06	609	476.93	615
441.63	610	454.99	617	468.02	623	16	480.53	630	492.70	635	504.50	641
468.96	636	482.13	642	494.96	648	17	507.37	654	519.43	660	530.98	665
495.40	660	508.35	666	521.05	672	18	533.32	677	545.11	683	556.20	687
520.94	682	533.75	688	546.28	694	19	558.25	699	569.56	704	580.03	708
545.69	704	558.30	709	570.51	715	20	581.99	719	592.66	723	602.40	727
N/A	N/A	N/A	N/A	N/A	N/A	Age 55	N/A	N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A	N/A	N/A	60	N/A	N/A	N/A	N/A	N/A	N/A
31.26	60	0.00	0	N/A	N/A	65	N/A	N/A	N/A	N/A	N/A	N/A
Issue Age 69		Issue Age 70		Issue Age 71		End of Year	Issue Age 72		Issue Age 73		Issue Age 74	
Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up		Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up
4.76	9	7.57	13	10.29	17	1	13.12	21	16.14	25	19.36	29
57.42	95	62.55	101	67.19	106	2	71.98	111	76.98	116	82.18	121
93.10	150	99.18	156	104.95	161	3	110.98	167	117.28	172	123.76	178
128.53	202	135.65	208	142.56	214	4	149.79	220	157.27	226	164.72	232
163.81	251	171.97	258	180.00	264	5	188.31	271	196.66	277	204.76	283
198.94	298	208.12	305	217.14	312	6	226.25	319	235.17	325	243.71	331
233.91	343	243.98	351	253.73	357	7	263.33	364	272.63	370	281.41	375
268.61	386	279.32	393	289.50	400	8	299.41	406	308.88	412	317.83	417
302.79	426	313.85	433	324.29	440	9	334.33	445	343.90	451	353.12	456
336.20	464	347.46	471	357.97	477	10	368.06	482	377.84	487	387.25	492
368.71	500	379.97	506	390.49	512	11	400.74	517	410.66	522	420.04	526
400.16	533	411.38	539	422.01	544	12	432.34	549	442.19	554	451.28	558
430.54	564	441.81	570	452.49	575	13	462.71	580	472.23	584	480.81	587
459.98	593	471.24	599	481.77	603	14	491.63	608	500.62	611	508.56	614
488.44	621	499.51	626	509.66	630	15	518.97	634	527.29	636	534.52	639
515.79	646	526.44	651	536.02	654	16	544.65	657	552.25	660	558.78	661
541.83	670	551.88	674	560.77	677	17	568.67	679	575.55	681	581.81	682
566.44	692	575.78	695	583.92	697	18	591.09	699	597.67	701	604.25	703
589.55	712	598.12	714	605.53	716	19	612.37	718	619.21	720	626.42	723
611.15	730	618.96	732	626.02	734	20	633.07	736	640.48	739	648.77	744
N/A	N/A	N/A	N/A	N/A	N/A	Age 55	N/A	N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A	N/A	N/A	60	N/A	N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A	N/A	N/A	65	N/A	N/A	N/A	N/A	N/A	N/A
Issue Age 75		Issue Age 76		Issue Age 77		End of Year	Issue Age 78		Issue Age 79		Issue Age 80	
Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up		Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up	Cash Values	Reduced Paid-Up
22.78	34	26.02	38	29.32	42	1	32.65	46	36.01	49	39.40	53
87.52	126	91.54	129	95.12	132	2	98.18	133	100.61	134	102.39	135
130.17	184	135.09	187	139.45	189	3	143.15	191	146.21	192	148.87	192
171.87	238	177.46	241	182.36	243	4	186.59	245	190.41	246	193.82	247
212.44	288	218.47	291	223.81	293	5	228.69	295	233.16	296	237.02	297
251.70	335	258.09	338	263.98	341	6	269.41	342	274.25	344	278.20	344
289.63	380	296.48	383	302.83	385	7	308.55	387	313.40	388	317.14	387
326.38	421	333.61	424	340.17	426	8	345.84	428	350.43	428	353.76	427
361.93	460	369.29	463	375.75	465	9	381.11	465	385.24	465	388.06	464
396.08	496	403.28	499	409.38	500	10	414.26	500	417.85	499	420.17	497
428.62	530	435.43	532	441.00	532	11	445.30	532	448.36	531	450.74	529
459.39	561	465.63	562	470.61	562	12	474.34	561	477.40	560	480.62	559
488.29	589	493.91	590	498.29	590	13	501.96	589	505.77	588	510.32	589
515.35	616	520.34	616	524.61	615	14	528.94	615	533.94	616	540.47	620
540.63	640	545.46	640	550.30	640	15	555.70	642	562.50	645	572.10	652
564.65	662	569.96	663	575.76	665	16	582.80	668	592.41	675	607.44	688
588.06	684	594.23	686	601.51	690	17	611.12	696	625.76	708	650.20	732
611.23	706	618.74	709	628.38	716	18	642.64	727	666.03	750	705.80	790
634.59	727	644.26	734	658.21	745	19	680.61	766	718.27	804	783.92	873
658.88	750	672.54	761	694.06	781	20	729.75	817	791.51	881	902.51	1000
N/A	N/A	N/A	N/A	N/A	N/A	Age 55	N/A	N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A	N/A	N/A	60	N/A	N/A	N/A	N/A	N/A	N/A
N/A	N/A	N/A	N/A	N/A	N/A	65	N/A	N/A	N/A	N/A	N/A	N/A

Method of Calculation The Guaranteed Values for Cash Values and Reduced Paid-Up Life Insurance are based on the 2001 Commissioner's Standard Ordinary Combined Ultimate Mortality Tables, age last birthday, assuming death occurs at the end of the Policy Year. All values are calculated using a 4.25% interest rate. The Guaranteed Values for any Policy Year not shown will be provided upon request. The Guaranteed Values under this policy are not less than the minimums required by the state in which this policy is issued. The method of computation of Cash Values and the Nonforfeiture Benefit has been filed with as required or requested by the state in which this policy is delivered.

Reserve Basis The reserves for this policy are calculated using an age last birthday Mortality Table not less than the minimum allowed by the valuation law of the state in which this policy is delivered, and the Commissioners Reserve Valuation Method. The statutory valuation interest rate does not exceed the maximum rate allowed by the valuation law of the state in which this policy is delivered.

POLICY LOANS

Policy Loans While this policy is In Force, You may take out a loan against the Cash Surrender Value for all or part of the Loan Value Available. This policy is used as sole security for the outstanding Policy Loan. The loan amount requested must be at least \$250. We may defer payment of a Policy Loan for up to six months except to pay premiums.

Loan Value Available The Loan Value Available is:

1. the Cash Surrender Value at the end of the current Policy Year; less
2. all unpaid Premium Payments due before the next Policy Anniversary; less
3. any loan interest that will be due on the next Policy Anniversary.

Policy Loan Balance The Policy Loan Balance is:

1. the sum of Policy Loans taken; plus
2. accrued loan interest; minus
3. the sum of Loan Repayments.

Loan Interest Rate Interest accrues daily on the Policy Loan. The maximum Loan Interest Rate is eight percent (8%) per year, compounded annually. Interest is due at the end of each Policy Year or, if earlier, on the date of any Policy Loan increase, Policy Loan repayment, Surrender, or activation of a Nonforfeiture Option. Interest not paid when due is added to the Policy Loan and accrues interest.

We may change the Loan Interest Rate, but it will never exceed the maximum rate. We will notify You of any increase in Loan Interest Rate at least 30 days before the new rate becomes effective.

Loan Repayment You may repay all or part of the Policy Loan Balance at any time while this policy is in force. Any Loan Repayment must be for at least \$25 or the Policy Loan Balance, if less.

Unpaid Loans We will deduct any unpaid Policy Loan Balance from the Cash Surrender Value and Proceeds Payable. Failure to repay a Policy Loan or the loan interest shall not terminate this policy unless the Policy Loan Balance equals or exceeds the Cash Value and not until 31 days after notice is mailed by Us to Your last known address and the last known address of any Assignee.

Automatic Premium Loan Past due Premium Payments for this policy will be paid automatically by Policy Loan if:

1. You made a signed request in the application or before the Grace Period ends; and
2. You have not revoked the Automatic Premium Loan option in writing; and
3. this policy has enough Cash Surrender Value to pay for at least one day's insurance premium.

Premium Payments may be resumed at any time while this policy stays In Force under this provision.

SETTLEMENT PRIVILEGES

Settlement

The proceeds of this policy will be paid as a lump sum deposit to a draft account unless otherwise requested.

In lieu of a single lump sum payment, You or the Beneficiary, as appropriate, may select Settlement under a Settlement Option. Any Settlement Option requires the proceeds to be at least \$2,500 and any periodic payments to be at least \$25. The first installment will be due or interest will begin on the date of death.

When You select a Settlement, the Beneficiary may not assign or receive payments before they are due unless expressly authorized by You.

Payee

The Beneficiary is the Payee under the Settlement Option. A Payee may name a contingent Payee to receive any final amount that would otherwise be paid to the estate of the Payee.

Settlement Options

The Settlement Options for this policy are shown below. The amounts and interest rates shown below are based on the guaranteed minimum settlement option interest rate and guaranteed minimum mortality rates. Our current rates may be higher. Information regarding current rates is available from Our Home Office.

For all Settlement Options: If the Payee dies before We have paid all funds available under the chosen Settlement Option, We will pay any remaining amount to the Payee's properly designated contingent Payee or, if no contingent Payee survives the Payee or none is elected, to the estate of the Payee. Annuity benefits at the time of their commencement will not be less than those that would be provided by the application of the Proceeds to purchase a single consideration immediate annuity contract at purchase rates offered by the company at the time to the same class of annuitants whether the annuity benefits are payable in fixed or variable amounts or both.

Interest Accumulation Settlement Option – Proceeds will earn interest at a rate not less than 2.5% per year compounded annually.

The Payee may withdraw these funds at any time. We will not retain these funds under this option longer than five years. However, if the Payee has not reached the age of majority as established by the law in the state in which the Payee resides, We may retain these funds until the Payee attains the age of majority.

If no contingent Payee exists then we will pay the remaining amount to the Payee's estate.

Interest Income Settlement Option – Each \$1,000 of proceeds will yield an income of not less than \$25 annually, \$12.42 semi-annually, \$6.19 quarterly, or \$2.05 monthly.

Unless the Payee has not reached the age of majority as established by the law in the state in which the Payee resides, the Payee may withdraw the proceeds at any time. After the first year, We may defer such withdrawal for up to six months.

Income for a Specified Period Settlement Option (Income Period Certain) – We will pay installments for a specified period. The amount of each installment per \$1,000 of proceeds will not be less than those shown in the table below.

Number of Installments	Amount of Each Monthly Installment	Number of Installments	Amount of Each Monthly Installment
12	\$84.27	96	\$11.46
24	42.66	108	10.31
36	28.78	120	9.39
48	21.85	180	6.64
60	17.69	240	5.27
72	14.92	300	4.46
84	12.94		

Income of a Specified Amount Settlement Option (Income Amount Certain) –

We will pay installments of a specified amount until the proceeds, together with not less than 2.5% interest compounded annually, are paid in full.

Income for Life With a Guaranteed Minimum Number of Installments

Settlement Option (Income Life) – We will pay installments for the lifetime of the Payee but for not less than a guaranteed number of installments. The amount of each installment will depend upon the adjusted age and gender of the Payee at the time the first payment is due. The adjusted age is determined by calculating the age at the nearest birthday of the Payee on the date of the first payment and subtracting a number that depends on the year in which the first payment begins:

First Payment Due	Adjusted Age is Age Minus
Prior to 2011	1
2011 to 2020	2
2021 to 2030	3
2031 to 2040	4
After 2040	5

AMOUNT OF EACH MONTHLY INSTALLMENT							
(Per \$1,000 of Proceeds)							
Adjusted Age of Male Payee	Number of Installments Guaranteed			Adjusted Age of Female Payee	Number of Installments Guaranteed		
	60	120	240		60	120	240
0	2.42	2.41	2.41	0	2.37	2.37	2.37
1	2.42	2.42	2.42	1	2.38	2.37	2.37
2	2.43	2.43	2.43	2	2.38	2.38	2.38
3	2.44	2.44	2.44	3	2.39	2.39	2.39
4	2.45	2.45	2.45	4	2.40	2.40	2.40
5	2.46	2.46	2.46	5	2.41	2.41	2.41
6	2.47	2.47	2.47	6	2.42	2.42	2.42
7	2.49	2.48	2.48	7	2.43	2.43	2.43
8	2.50	2.50	2.49	8	2.44	2.44	2.44
9	2.51	2.51	2.51	9	2.45	2.45	2.45
10	2.52	2.52	2.52	10	2.46	2.46	2.46
11	2.54	2.54	2.53	11	2.47	2.47	2.47
12	2.55	2.55	2.55	12	2.49	2.49	2.48
13	2.56	2.56	2.56	13	2.50	2.50	2.50
14	2.58	2.58	2.57	14	2.51	2.51	2.51
15	2.59	2.59	2.59	15	2.53	2.53	2.52
16	2.61	2.61	2.60	16	2.54	2.54	2.54
17	2.63	2.63	2.62	17	2.55	2.55	2.55
18	2.64	2.64	2.64	18	2.57	2.57	2.57
19	2.66	2.66	2.65	19	2.58	2.58	2.58
20	2.68	2.68	2.67	20	2.60	2.60	2.60
21	2.70	2.70	2.69	21	2.62	2.62	2.61
22	2.72	2.72	2.71	22	2.63	2.63	2.63
23	2.74	2.74	2.73	23	2.65	2.65	2.65
24	2.76	2.76	2.75	24	2.67	2.67	2.67
25	2.78	2.78	2.77	25	2.69	2.69	2.68
26	2.80	2.80	2.80	26	2.71	2.71	2.70
27	2.83	2.83	2.82	27	2.73	2.73	2.72
28	2.85	2.85	2.84	28	2.75	2.75	2.75
29	2.88	2.88	2.87	29	2.77	2.77	2.77
30	2.91	2.90	2.89	30	2.80	2.80	2.79
31	2.93	2.93	2.92	31	2.82	2.82	2.81
32	2.96	2.96	2.95	32	2.85	2.84	2.84
33	2.99	2.99	2.98	33	2.87	2.87	2.86
34	3.03	3.02	3.01	34	2.90	2.90	2.89
35	3.06	3.06	3.04	35	2.93	2.93	2.92
36	3.09	3.09	3.07	36	2.96	2.96	2.95
37	3.13	3.13	3.11	37	2.99	2.99	2.98
38	3.17	3.17	3.14	38	3.02	3.02	3.01
39	3.21	3.21	3.18	39	3.05	3.05	3.04
40	3.25	3.25	3.22	40	3.09	3.09	3.07
41	3.3	3.29	3.26	41	3.13	3.12	3.11
42	3.34	3.34	3.30	42	3.17	3.16	3.14
43	3.39	3.38	3.34	43	3.21	3.20	3.18
44	3.44	3.43	3.38	44	3.25	3.24	3.22

Adjusted Age of Male Payee	Number of Installments Guaranteed			Adjusted Age of Female Payee	Number of Installments Guaranteed		
	60	120	240		60	120	240
45	3.50	3.49	3.43	45	3.29	3.29	3.26
46	3.55	3.54	3.48	46	3.34	3.33	3.30
47	3.61	3.59	3.53	47	3.39	3.38	3.35
48	3.67	3.65	3.58	48	3.44	3.43	3.39
49	3.73	3.71	3.63	49	3.50	3.49	3.44
50	3.80	3.78	3.69	50	3.55	3.54	3.49
51	3.87	3.85	3.74	51	3.61	3.60	3.54
52	3.94	3.92	3.80	52	3.67	3.66	3.60
53	4.02	3.99	3.86	53	3.74	3.73	3.65
54	4.10	4.07	3.92	54	3.81	3.79	3.71
55	4.19	4.15	3.98	55	3.88	3.86	3.77
56	4.28	4.24	4.05	56	3.96	3.94	3.83
57	4.37	4.33	4.11	57	4.04	4.02	3.90
58	4.47	4.42	4.18	58	4.13	4.10	3.97
59	4.58	4.52	4.24	59	4.22	4.19	4.03
60	4.70	4.63	4.31	60	4.32	4.28	4.10
61	4.82	4.74	4.38	61	4.42	4.38	4.18
62	4.95	4.85	4.45	62	4.53	4.48	4.25
63	5.09	4.98	4.51	63	4.65	4.59	4.32
64	5.23	5.11	4.58	64	4.77	4.71	4.40
65	5.39	5.24	4.65	65	4.90	4.83	4.47
66	5.55	5.38	4.71	66	5.04	4.96	4.54
67	5.73	5.53	4.77	67	5.20	5.09	4.62
68	5.91	5.68	4.83	68	5.36	5.23	4.69
69	6.11	5.83	4.88	69	5.53	5.38	4.76
70	6.32	6.00	4.93	70	5.71	5.54	4.82
71	6.54	6.16	4.98	71	5.91	5.71	4.88
72	6.77	6.33	5.03	72	6.13	5.88	4.94
73	7.01	6.51	5.06	73	6.35	6.06	4.99
74	7.27	6.68	5.10	74	6.60	6.25	5.04
75	7.54	6.86	5.13	75	6.86	6.45	5.08
76	7.83	7.04	5.16	76	7.14	6.64	5.12
77	8.13	7.22	5.18	77	7.43	6.85	5.15
78	8.44	7.40	5.20	78	7.75	7.05	5.18
79	8.77	7.57	5.22	79	8.09	7.26	5.20
80 and over	9.11	7.74	5.24	80 and over	8.44	7.46	5.22

We have the right to require evidence that the Payee is living on the date of any payment made after the guaranteed number of installments.

Farmers New World Life Insurance Company
Policy Specifications

Prepared on [4/1/2011]

Insured:	[JOHN DOE]	Face Amount: [\$20,000]
Policy Number:	[007002219]	
Issue Date:	[April 1, 2011]	Issue Age: [45] Gender: [Male]
Maturity Date:	[April 1, 2066]	
Policy Owner:		
Policy Co-Owner:		
Policy Co-Owner:		

Premiums	Annual	Semi-Annual	Quarterly	Monthly	[Special Monthly Mode]
Initial Premium Payment	[\$2,430.95]	[\$1,220.48]	[\$612.74]	[\$204.91]	[\$201.91]

[You have selected to pay by Special Monthly Mode.]

[Policy Fee: Annual: \$140.00, Semi-Annual: \$75.00, Quarterly: \$40.00, Monthly: \$14.00, Monthly BCP (EFT): \$11.00]

POLICY DEATH BENEFIT

The Death Benefit payable will be one of the following, depending on the Policy Year in which the Insured dies and the cause of death, unless death is due to suicide in the first two years.

	Natural Causes	Accidental Bodily Injury*
Policy Years 1 and 2	Premiums paid multiplied by 1.1	[\$20,000]
Policy Years 3 and later	[\$20,000]	[\$20,000]

*The term Accidental Bodily Injury excludes certain causes of death which are defined in the Excluded Accidental Causes section of the policy.

SCHEDULE OF BENEFITS

	Amount	Annual Premium	Premium Payable
Life Insurance	[\$20,000]	[\$2,430.95]	To Attained Age 100
TOTAL PREMIUM		[\$2,430.95]	

THIS POLICY HAS A LIMITED GRADED DEATH BENEFIT – PLEASE READ YOUR CONTRACT CAREFULLY.

This policy contains a Graded Death Benefit clause which means in order to receive the full benefits that this policy offers You must live two Policy Years beyond the Issue Date of this policy. If death occurs as a result of an Accidental Bodily Injury at any time while the policy is in force, then the Ultimate Face Amount shall be payable. In the first two Policy Years, death from an Excluded Accidental Cause is payable the same as Death from Natural Causes.